

Council of Governors

UNCONFIRMED Minutes of the 70th meeting of Sheffield Health and Social Care NHS Foundation Trust's Council of Governors held virtually on Tuesday, 15 June 2021 and in the 7th Floor Meeting Room, Fulwood House, Sheffield S10 3TH

Present:

Name	Governor Constituency	Name	Governor Constituency
Angela Barney	Public South West	Ben Duke	Public South West
Billie Critchlow	Carer	Dave Swindlehurst	Appointed (Sheffield MENCAP)
Bradley Wass	Central Support Staff	Julian Davis	Nursing
Adam Butcher	Service User	Josie Paszek	Appointed (Sheffield City Council)
Cllr Steve Ayris	Appointed (Sheffield City Council)	Elizabeth Carthy	Psychology
James Barlow	Appointed (Sheffield Carers Centre)	Liz Friend MBE	Carer
Julie Marsland	Appointed	Scott Weich (Prof)	Appointed (UoS)
Kate Steele	Service User	Steve Hible	Public North East
Nev Wheeler OBE (In Person)	Service User	Susan Wakefield	Appointed (SHU)
Sue Roe (In Person)	Carer	Terry Proudfoot	Service User/ Lead Governor
Sylvia Hartley (In Person)	Public North West		

In attendance:

Name	Designation	Name	Designation
Mike Potts	Chair	David Walsh	Director of Corporate Governance
Amber Wild	Corporate Governance Manager	Francesca O'Brine	Corporate Governance Administrator (Minutes)
Anne Dray	Non-Executive Director	Mike Hunter	Executive Medical Director
Heather Smith	Non-Executive Director	Caroline Parry	Executive Director of People
Pat Keeling	Director of Special Projects	Richard Mills	Non-Executive Director
Sandie Keene CBE	Non-Executive Director	Olayinka Fadahunsi-Oluwole	Non-Executive Director

Apologies:

Name	Designation	Name	Designation
Jonathan Hall	Service User	Claire Lea	Charis Consultants Ltd
Margaret Spencer	Public North West	Brendan Stone (Prof)	Associate Non-Executive Director

Minute	Item	Action
CoG 70/01	<p>Welcome and Apologies The Chair welcomed everyone, and apologies noted as above.</p> <p>The Chair and Board offered a special welcome to Dr Olayinka (Yinka) Fadahunsi-Oluwole as the newly appointed NED, and Celia Jackson-Chambers as the newly appointed Governor from SACHMA.</p> <p>Governors leaving the Board were listed as Kate Steele, Elizabeth Carthy, Dr Nusrat Mir, Nicholaus Hall, Adam Hurst, Lee Coxon, and Angela Barney.</p> <p>Varria Russell-White, a Carer Governor, has resigned with immediate effect due to becoming a Staff Governor within the organisation in which she is employed.</p> <p>The Chair thanked all the Governor's contributions and wished them well in the future. The Chair advised that there are still ways to remain connected and get involved with the work of the Trust.</p> <p>The Lead Governor thanked the Governors for their input and was very sorry to lose them.</p>	
CoG 70/02	<p>Declarations of Interest There were no declarations of interest.</p>	
CoG 70/03	<p>Open Minutes of the Meeting held on 19 April 2021 Subject to the following amendments noted in 70/04, the Minutes of the Council of Governors held on 19 April 2021 were APPROVED as a true and accurate record and accordingly signed by the Chair.</p> <p>Cllr Steve Ayris noted that his apologies were not recorded due to an I.T. error.</p> <p>The Lead Governor noted that Item 3 on page 1 incorrectly stated that the minutes of 17th December were approved. It was agreed that this would be amended. The Lead Governor requested that their comments on page 4 of the minutes regarding hard-to-reach service users should be changed to: service users that are called hard to reach and that consideration should be made of how these service users are referred to going forward.</p> <p>The Chair advised the Council that these minutes would be rectified to reflect these changes.</p>	Approved
CoG 70/04	<p>Matters Arising from Minutes of 19 April 2021 and Action Log The Chair reported that Dr Olayinka Fadahunsi-Oluwole has negotiated changes to her job plan and clinical commitments with the Sheffield Children's Hospital, allowing her to attend Council of Governor meetings in the afternoons on the 1st and 3rd, and potentially 2nd, Tuesday of the month. This will take six months to implement.</p>	

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	<p>The Chair thanked Dr Olayinka Fadahunsi-Oluwole and the Sheffield Children's Hospital for making these arrangements.</p> <p>The Chair proposed a change to the order of the agenda to accommodate a time commitment for Pat Keeling, Director of Special Projects and requested that the meeting begin with agenda item 70/10. This was agreed by the Council.</p>	
CoG 70/10	<p>Objective 3 – Transformation Annual Operational Plan and Strategic Direction</p> <p>Pat Keeling, Director of Special Projects presented a report to the meeting.</p> <p>The Annual Operational Plan and strategic direction have been developed following the feedback received from Governors concerning language.</p> <p>For the Trust to achieve its full potential it must be supported by its vision and strategic aims. Work has been carried out on refreshing the Trust's values. The Enabling strategies help to deliver the Clinical and Social Care strategy work led by Dr Mike Hunter. All of this is supported by the organisation's culture of improvement.</p> <p>A new strategic aim has been added: to ensure services are inclusive in terms of staff, and that communities are served. A new strategic priority has been added: partnerships – working together to have a bigger impact, to fulfil our role within the NHS reconfiguration around place, Accountable Care Partnerships, and the Integrated Care Systems. The Trust's very strong relationships with universities is special and differentiates it from other, similar organisations.</p> <p>Plans for the next two years are to develop the Transformation programme, which now includes the Clinical and Social Care strategy, and build on the progress made to date on Back to Good. Focus will be on Quality Improvement, leadership, and the Well-Led Action Plan, and creating safe and dignified facilities.</p> <p>The Annual plan focuses on increases to the workforce in line with the Long-Term plan, and parity of esteem for Mental Health, Learning Disability and Autism Services. The Trust must ensure it is well-prepared for an increase in activity due to COVID19.</p> <p>Work is being carried out to continue improving the Clinical and Social Care strategy and the People strategy.</p> <p>The document and summary document will be made available within the next month to six weeks.</p> <p>Professor Scott Weich requested a collaboration with Pat Keeling outside of this meeting to capture the benefits of the Trust's relationship with universities in a more powerful way within the strategy document. The Chair added that to reap the benefits of Integrated Care and working across a wider partnership it is imperative that the Trust co-produces its strategy within health with other partners. Links with Universities is very important and there is a drive for innovation and the use of Research and Development to tackle this. At the upcoming</p>	

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	<p>Integrated Care System workshop on 29th June 2021, connections need to be continued to be made with the wider determinates of health.</p> <p>Adam Butcher requested that plain English is used to ensure that the language is appropriate for the Trust's clients, and that he would welcome a conversation with Pat Keeling outside of this meeting. The Chair added that meaningful stories need to be described within the strategy, highlighting how it will impact on individual's lives.</p> <p>Billie Critchlow questioned to what extent the strategy and the priorities arose out of co-production with staff, service user, and patient consultation. Pat Keeling stated that the strategy was built on a wider listening exercise, triangulating feedback from across the organisation. This included 18 months of work with various groups and with staff, linking into the issues around inclusion and partnership, and the Clinical and Social Care strategy development. The Chair confirmed that the Trust knows engagement needs improvement, and this was discussed to some extent at the recent Governor workshop. COVID19 has impacted on access to people. Brendan Stone is conducting further work on this which will hopefully improve this further.</p> <p>Angela Barney highlighted that the Clinical and Social Care strategy section within the document does not state the way that the Trust co-produces on its delivery of care and referred to slide three of the presentation, highlighting that coproduction is not clearly stated enough in this strategy and therefore, in everything that the Trust does. The Chair confirmed with Pat Keeling that this needs to be strengthened within the strategy document.</p> <p>Mike Hunter added that the final draft document of the Clinical and Social Care strategy that was discussed at open Board last month makes this point clearly – the strategy itself was co-produced and the strategy is saying that co-production is one of the levers used for getting quality improvement to happen.</p>	
CoG 70/05	<p>Chair's Report to the Council of Governors</p> <p>The Chair reported on the recent CQC revisit for three weeks in May, following the initial report. and thanked council members for participating in the workshop.</p> <p>The council was advised that feedback received following the inspection would be shared at this meeting but is still subject to change as the CQC continue to investigate certain areas and requesting further information.</p> <p>Feedback under the Well-Led agenda from the CQC visit included:</p> <ul style="list-style-type: none"> ○ Significant improvement in the Executive Leadership with good levels of support, challenge, and sense of a team ○ More effective Non-Executive Director and Board challenge ○ Significant improvement in the role of Governors and relationships ○ Significant change through the organisation, with appropriate and thought-through moderation to reduce risk; there has been a remarkable difference in the Board and committees ○ Freedom to speak up embedded and much improved ○ Lack of diversity on the Board acknowledged, and significant 	

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	<p>improvements have been made to bring challenge into conversations. Advised to consider someone from a non-public sector background.</p> <ul style="list-style-type: none"> ○ Improved relationships across the organisation ○ Following the Community Mental Health Teams' issues and grievance, workloads were capped. The Trust has been asked to look at whether there has been an impact on services elsewhere in the system because of those reduced caseloads. ○ The Trust vision and strategy is evident and sets out our ambition and journey but involvement of engagement of Service Users is variable ○ Stronger governance processes and Board Development is evident. The agendas are extensive and CQC questioned whether it could be reduced but agreed that conversations were professional and purposeful, because of these big agendas ○ Pockets of unreported incidents require further investigation ○ Closed culture within the organisation remains a challenge, in some areas. ○ Risk Management processes improved but want to explore this further from floor to Board. ○ Reporting of Safeguarding issues requires more attention – how they are picked up and reported on ○ Some areas of the Mental Health Act Code of Practice have not been met but this is known to the Trust and has been picked up by the Mental Health Legislation Committee. ○ Drive to improve Information Management, Technology and the EPR procurement was acknowledged by CQC ○ Quality Improvement – suggested that an embedded organisational-wide approach be maintained. ○ Quality and Diversity – passion with this noted and significant progress was addressed but acknowledged that there is more work to do <p>Within the Clinical areas, some improvements were noted, and it was identified that some issues persist within acute wards. The opinion is that the overall Trust rating, Inadequate, will not change but that some of the subset dials within it might.</p> <p>CQC issues at Firshill Rise were reported to the CQC by the Trust in May 2021. The CQC have visited the site. The Trust is aware that there are various issues that need to be addressed there to assure the regulators that clients are receiving the best possible care. CQC are doing a lot of visits to Learning Disability services across the country but emphasised that the CQC were invited by the Trust.</p> <p>Professor Scott Weich requested that each NED offer their reflections and opinion on the Trust's next steps towards improvement.</p> <p>Richard Mills noted that the Trust had made enormous positive strides over the last year that everyone should be proud of and highlighted that this is an ongoing process; improvement requires long-term vigilance and there is still much to do.</p> <p>Anne Dray acknowledged that this is a long journey and has recognised</p>	

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	<p>the willingness within the organisation to work together and make changes. Anne Dray described her previous experience within a Trust that was in Special Measures and acknowledged that change takes a very long time, and resilience is key.</p> <p>Sandie Keene acknowledged that this is a long journey and is encouraged by the awareness of what the real risks, difficulties and tasks ahead are: leadership, culture, staffing, I.T., and environment. Sandie Keene advised that the focus needs to shift toward impact and the outcomes of what is being achieved. The agenda for this year is vast and there is a need to be constantly alert to the dangers of being falsely assured.</p> <p>Heather Smith highlighted the importance of a culture shift regarding how changes are made. Staff's trust in the organisation that their opinions on changes are listened to and being implemented must be improved. Positive change needs to be driven by everyone within the Trust.</p> <p>The Chair added that the Board was more unified and in control, sharing skills and welcoming constructive challenge. It was now more able to tackle big issues.</p> <p>Nominations for the Governor elections has closed. Balloting for Constituencies closes on 24th June 2021 with an announcement on 25th June 2021. There will be an Induction Workshop for new Governors on 5th July 2021, but existing Governors are welcome to attend. Corporate Assurance Manager, Amber Wild will send an invitation to all the Governors.</p> <p>It had been previously agreed to put together a rota of Council of Governors to attend sub-committee meetings and visits to gain exposure into how the Non-Executive Directors work and engage with the organisation. The Chair requested that interest was expressed to Amber Wild by Friday 18th June 2021, to allow the plans for this to be finalised.</p> <p>There is an Integrated Care System and Accountable Care Partnership Workshop on 29th June 2021 from 2pm to 4pm for all governors. Once the agenda is finalised, Amber Wild will send out the programme and invitations.</p> <p>Non-Executive Director appraisals will be completed by 2nd July 2021, they will then be brought to the Nominations and Remunerations Committee with the outcome reported back to the August 2021 Council of Governors meeting.</p>	
CoG 70/06	<p>Governor Story – Outgoing Governor Experiences Presentation and Discussion</p> <p>The Governor Story was presented by three Governors: Kate Steele, Elizabeth Carthy, and Angela Barney, whose terms of office has come to an end. They reflected on their experiences as Governors, and this was positively received by the Board.</p>	
CoG 70/07	<p>People Committee Presentation from the People Sub-Committee</p>	

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	<p>The Chair addressed that, going forward, each of the Sub-Committee Chairs will present to the Council of Governors its priorities and agenda for the future. This will work in tandem with the observations, as discussed in the Chair's Report, Item 70/05.</p> <p>Heather Smith presented the Council with a summary of the development and issues from the People Committee over the last few months.</p> <p>The People strategy and plan forms the agenda. Data and information sit at the top of the triangulation of assurance, and issues around this are vastly improved. Observation is still an issue due to COVID19, but the People side of the things is an improving position following work with Staff Network Groups and the Health and Wellbeing Group, and the Freedom to Speak up Guardian joining the Committee.</p> <p>Heather Smith discussed the challenging work and progress being made around Health and Wellbeing within the Trust. The Trust has altered in response to feedback on new initiatives and their uptake, ongoing risk assessments and support groups, Health and Wellbeing discussions being included in PDRs, and looking at supporting staff with remote working.</p> <p>The move to a Just and Learning culture and the impact of this is being monitored to ensure progress is continuing to be made.</p> <p>Sickness absence rate over a rolling twelve-month basis has significantly reduced. This data could be indicative of several new factors affected by agile working: less transmission of illness, and flexible working opportunities, for example. It is encouraging but should not be taken lightly. Questions should be asked about burnout. The challenge of tackling burnout is on both the People Committee agenda and the national agenda. The data presented shows that anxiety, stress, or depression are the most common cause of illness-related absence.</p> <p>Supervision compliance has significantly improved, but the quality of supervision needs further investigation. Work is being carried out in collaboration with staff and the University of Sheffield.</p> <p>The new Trac recruitment system will provide a 'time to recruit' performance indicator so that the Committee can regulate and continue to improve its operational processes within recruitment. Recruitment strategies to increase diversity are under review.</p> <p>Nursing recruitment and retention is monitored monthly, and the numbers remain consistent. There are no management vacancies, but the Trust carries significant Band 5 vacancies and retention is the main issue around this. Increase in Trust turnover is on the committee's radar regarding its implications on recruitment, retention and the health and wellbeing of staff.</p> <p>There is a new role report due in July 2021 addressing the impact of new roles within the Trust. The workforce plan has been recently</p>	

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	<p data-bbox="331 248 1174 277">submitted, which identifies the growth of IAPT in the community.</p> <p data-bbox="331 315 1265 517">The Trust are at the implementation stage of the Organisational Development Plan. NHSE/I's culture and collective leadership programme will be used to develop collective, inclusive, and compassionate leadership. Staff engagement has been high on the agenda. Internal Audit only provided partial assurance on the progress of staff engagement.</p> <p data-bbox="331 555 1265 714">Equality, diversity, and inclusion is included on every agenda and includes national reporting requirements. There is a need for action following the Big Conversation and the national initiative after the death of George Floyd. The committee is proud of their work around the staff network groups and this was shared with the CQC.</p> <p data-bbox="331 752 1238 817">The Committee continues to seek assurance on impact and progress and improve sub-committee cross-over and governance.</p> <p data-bbox="331 855 1235 987">Caroline Parry added that the key pillars of the People committee's agenda reflect the National People Plan. The committee ensure that engagement is maintained with the Integrated Care System so that good practice is developed and rolled out regionally.</p> <p data-bbox="331 1025 1273 1355">The Lead Governor discussed that within the People strategy and plan there were opportunities to address systemic problems that lead to lack of representation of certain communities. It was questioned whether a plan had been developed to try to address this and if there is assurance that it would be effective. Caroline Parry noted that the committee are ensuring that collaboration is sought from other organisations to strengthen that opportunity. Engagement with staff network groups is used to gain a different perspective. Heather Smith added that the committee were only partially assured that it would be effective as there is a long way to go concerning impact.</p> <p data-bbox="331 1393 1273 1624">The Lead Governor asked whether staff had felt the benefits of the Health and Wellbeing initiatives being implemented. Caroline Parry noted that feedback collated from The Wellbeing Festival helped the committee shape the agenda moving forward. Wellbeing champions as a concept is being considered. Heather Smith added that it is important to consider that health and wellbeing is different and specific to individuals.</p> <p data-bbox="331 1662 1278 1928">Cllr Steve Ayriss expressed concern over the issue of burnout but noted that it was understandable considering COVID19. There is a lot of work being carried out regarding retention, but it is a problem across the whole health and care sector. Clarification around whether the strategy includes a focus on training, apprenticeships, and career paths was requested. Heather Smith noted that this comes under the Workforce Transformation report, but that it is logical to combine retention and staff development as it is linked.</p> <p data-bbox="331 1966 1259 2058">Josie Paszek questioned whether, in terms of retention, the committee were monitoring data around demographics. Heather Smith confirmed that the Trust receives reports on this and is heavily focused on</p>	

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CoG 70/09	<p>retention.</p> <p>Objective 2 – CQC: Getting Back to Good Our Learning from Year 1</p> <p>Dr Mike Hunter informed the Council that a workshop was held in May 2021, facilitated by the Quality and Improvement team, to gain insight into what lessons could be learnt from Year 1 of Back to Good. Feedback showed that people felt more included than ever before in this process.</p> <p>The five main lessons learnt were:</p> <ul style="list-style-type: none"> ○ Better engagement across the organisation is crucial for success ○ More effective co-production will lead to better interventions for improvement ○ Quality improvement is daily work ○ Greater clarity for evidence of improvement will lead to better assurance of improvement ○ Sustainable improvement needs more than task-orientated approaches <p>Sandie Keene added that these five lessons learnt dictate the agenda for next year and how the Trust questions and assures itself about the Year 2 Action Plan.</p> <p>Assurance of several actions has been made at Board and at the Quality committee but is still required in terms of impact. Assurance was given to the Council that the Trust is sighted on this and that it is included in the BAF, Assurance Framework, and Corporate Risk Register.</p> <p>Assurance Manager, Amber Wild, will circulate the Board Paper to the Council of Governors.</p> <p>Dr Mike Hunter explained that Getting Back to Good requires the Trust to be resolutely focused in dealing with CQC action planning. Vision is necessary to articulate this strategically and plan optimistically for the future.</p> <p>The Clinical and Social Care strategy has been consulted on and co-produced widely. The strategic plan is to provide person-centred, evidence-based, trauma-informed, and strength-based care across Primary Care, Sheffield, and the wider System. Developing care models that promote recovery comes before designing services to meet people's needs.</p> <p>Sheffield has some of the most deprived and wealthiest areas in the country within it. The strategy must be able to speak to that.</p> <p>The fundamental principles that have driven the development of the strategy include inequalities, the Long-Term Plan from 2018, COVID19, Suicide Prevention, and policy changes captured in the White Paper.</p> <p>The project plan is divided into three stages: the engagement stage, the development stage, the Trust's current position, and the evaluation and</p>	AW

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	<p>implementation stage.</p> <p>There have been at least twenty workshops. Engagement has been sought from circa. 400 people, including SHSC staff, service users, carers, the Local Authority, the Clinical Commissioning group, the Sheffield Psychology Board, and Health Watch.</p> <p>This is a five-year plan with the long-term aim being that SHSC might lead the system for outstanding care. The driver is about increasing quality and reducing inequality by working together on an equitable level to do the right thing.</p> <p>Dr Mike Hunter confirmed with Billie Critchlow that the main barrier to achieving this would be the strength of leadership across the whole of SHSC to deliver something ambitious and transformational.</p> <p>The Board of Directors approved a final draft to go out in July 2021. Amber Wild will circulate the Paper to the Council of Governors and collate any feedback received.</p>	AW
CoG 70/11	<p>Council of Governors Development Programme Presentation – feedback on behalf of Claire Lea Upcoming Workshops</p> <p>The Chair presented this report on behalf of Claire Lea.</p> <p>The Chair told the Council that Claire Lea’s summary of the Council of Governors development programme was very comprehensive. Questions have arisen following the workshop that need further attention. The Chair proposed that these are taken to the next NED meeting with feedback given at either the next workshop or at a future meeting.</p> <p>The workshop was positively received. Development needs to continue. The Chair confirmed with the Council that they were happy to receive the report.</p>	
CoG 70/12	<p>Governance Report</p> <p>David Walsh fed back that the report is detailed and has been circulated to all governors. Additional documents that are referred to in the report can be made available upon request and follow up questions and feedback are welcomed. The last few months have been busy with various changes being made to the Trust’s governance systems.</p> <p>Since this report has been published the Annual Report has gone through its final stages at Audit committee.</p>	
CoG 70/13	<p>Any Other Business</p> <p>The Chair confirmed with the Governors that there was no other business to discuss. The Chair thanked everyone for their contributions.</p>	
	CLOSE	

Dates of next Council of Governors meetings:

18th August 2021

6th October 2021

14th December 2021

15th February 2021