

Council of Governors

CONFIRMED Minutes of the 76th meeting of Sheffield Health and Social Care NHS Foundation Trust's Council of Governors held virtually on Tuesday, 26 April 2022 and in Committee Room 4, Fulwood House, Sheffield S10 3TH

Present:

Name	Governor Constituency	Name	Governor Constituency
Terry Proudfoot	Service User/ Lead Governor	Ben Duke <i>(in person)</i>	Public South West/Deputy Lead Governor (1 st half of the meeting)
Billie Critchlow	Carer Governor	Mark Gamsu	NHS Sheffield CCG
Celia Jackson- Chambers	Appointed Governor (SACMHA)	Rebecca Lawlor	Service User
Adam Butcher	Service User Governor	James Barlow	Appointed Governor (Sheffield Carers Centre)
Catherine Draper	Staff Governor Psychology (1 st Half)	Dave Swindlehurst	Appointed Governor (Sheffield MENCAP)
Nev Wheeler OBE <i>(in person)</i>	Service User Governor	Liz Friend MBE	Carer Governor
Chris Digman	Public South East	Ahmed Ibrahim	Public North East
Julie Kitlowski	Public South West	Bradley Wass	Staff Governor Central Support (2 nd half)
Jonathon Hall	Service User Governor		

In attendance:

Name	Designation	Name	Designation
Beverley Murphy	Executive Director of Nursing and Professions	Sharon Mays	Chair
Deborah Lawrenson	Director of Corporate Governance	Amber Wild	Corporate Assurance Manager
Heather Smith	Non-Executive Director	Richard Mills	Non-Executive Director
Brendan Stone (Prof)	Associate Non- Executive Director	Olayinka Monisola Fadahunsi-Oluwole	Non-Executive Director
Anne Dray	Non-Executive Director	Sarah Bawden	Deputy Director of People

Apologies:

Name	Designation	Name	Designation
Julie Marsland	Staff Side	Josie Paszek	Appointed (Sheffield City Councillor)
Sylvia Hartley	Public North West	Steve Ayris	Appointed (Sheffield City Councillor)
Nicola Hodson	Service User Governor		
Scott Weich (Prof)	Appointed (UoS)		

Minute	Item	Action
CoG 76/01	<p>Welcome and Apologies Apologies were noted from Julie Marsland, Josie Paszek, Steve Ayris, Julie Marsland, Nicola Hodson, Scott Weich and Sylvia Hartley and Jan Ditheridge, Chief Executive.</p> <p>The Chair welcomed and introduced Deborah Lawrenson to members.</p>	
CoG 76/02	<p>Governor Story Public Governor Experience – Ben Duke Ben Duke presented his “Governor Story” to the Council of Governors (CoG) reflecting on what led him to stand as a Governor, and his skills and experiences that he brings to the governor role.</p>	
CoG 76/03	<p>Declarations of Interest None declared.</p> <p>Deborah Lawrenson alerted members to the upcoming collation of declarations of interest for 2022/2023</p>	
CoG 76/04	<p>Minutes of the Council of Governors meeting held on 15 February 2022 An error on the minutes was noted as James Barlow appeared as both present and submitting apologies when he was unable to attend.</p> <p>The minutes of the meeting of 15 February 2022 were APPROVED as a true and accurate record pending the above amendment to the attendance record.</p>	
CoG 76/05	<p>Matters Arising and Action Log After discussion, it was agreed that the following outstanding actions could be closed:</p> <ul style="list-style-type: none"> 73/09 Understanding of Integrated Care Systems (ICS) - Governors to consider how they can engage with the ICS <p>75/10 Transformation – Electronic Patient record. A verbal update was provided at the meeting but some questions remain unanswered. Action: Key dates for implementation for new Electronic Patient Record to be communicated to CoG and then action can be closed.</p> <p>Following on from the discussions regarding the open actions, it was agreed that Adam Butcher would speak to Teresa Clayton and Salli Midgely with regards to the wording of patient letters (action 75/10) in Adam’s role as chair of the coproduction group and expert by experience.</p>	Corporate Governance Adam Butcher

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	<p>Celia Jackson-Chambers and Beverley Murphy to discuss service user feedback regarding access to face-to-face IAPT provision. An email briefing would be circulated prior to the next CoG meeting which would include data on the take up of online provision vs face-to-face.</p>	<p>Beverley Murphy</p>
<p>CoG 76/06</p>	<p>Chair's Report to the Council of Governors</p> <p>The Chair explained that since the last CoG meeting in February drop-in sessions have been held for Governors to meet with the Chair and give feedback on how to develop CoG going forwards These sessions have been a useful forum for discussion ideas and development, and have been well attended.</p> <p>There will be a number of development sessions held for governors over the coming year on Quality and the Community Mental Health Team.</p> <p>Future dates for CoG meetings are subject to change and it is likely that there will not be an August meeting due to availability. Suitable alternative dates for the summer and autumn meetings will be planned and Governors will be kept informed.</p> <p>The Chair explained that 8 candidates have been shortlisted for the two new Non-Executive Directors (NEDs) posts. Interviews and stakeholder panels are scheduled to take place in the week commencing 9th May 2022. Candidates have been invited to meet with the Chair and CEO prior to interview. There will be an extra ordinary CoG meeting following the interviews and the Chair requested members to attend as quoracy would be essential to ratify the appointments should the interviews be successful.</p> <p>Chair visits to Trust services continues, most recently visiting the Specialist Community Forensic Team and the new Trust Head Quarters.</p> <p>The Chair has also taken part in the Trust's Coffee and Connections scheme, which has provided the opportunity to meet a number of members of staff from across the organisation and these are held virtually currently.</p> <p>The Chair has been busy with Sheffield Place and Integrated Care Systems work. The Chair has been leading the recruitment panel for an independent Chair for the Sheffield Health Care Partnership, in addition to continuing to meet with Chairs and Chief Executive Officers of Trusts across the Yorkshire and Humber region monthly.</p> <p>Billie Critchlow asked whether the COG would be meeting virtually for future meetings and suggested that CoG was less effective when meeting virtually.</p> <p>Beverley Murphy explained that the NHS remains in a position of the highest level of incident nationally and that the Trust was bound by national guidance. The current guidance remains in place to avoid meeting face to face. Face masks continue to be worn in both clinical and non-clinical settings currently although it is anticipated that this might change for non-clinical areas provided that social distancing can be maintained.</p>	

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	<p>The Chair added that changes are limited due to current guidance and as soon as the Trust is allowed to lift the restriction on face-to-face meetings, governors will be consulted with the possibility of a hybrid model for attendance going forwards.</p>	
CoG 76/07	<p>Update from the Board</p> <p>The Chair introduced the new format for receiving an update from the Board of Directors (BoD) which has been implemented following feedback from governors. The report gives an overview of what was covered at the recent BoD and sub-committees. There will be a more focussed presentation each meeting from one of the committees in addition to this overarching report.</p> <p>Deborah Lawrenson explained that this is an iterative process with the aim of finding the right balance of information and welcomed feedback from Governors.</p> <p>Celia Jackson-Chambers welcomed the new format of receiving updates from BoD and suggested that the report was word heavy which detracted from the message being delivered. Celia Jackson-Chambers requested that the use of acronyms is avoided.</p> <p>Action: feedback to be sought from Governors for the next Council of Governors meeting regarding the report format.</p> <p>The Chair explained that the statutory role of the governor was a topic which was often discussed in the governor drop-in sessions - holding NEDs to account and also the statutory duty of governors to represent the views of members of the public and their constituents. The Chair put forward a proposal to CoG to have a standing item included on the agenda for Governor feedback.</p> <p>Billie Critchlow commented that there used to be something similar in the past whereby governors filled out a form to report back on Governor activities which were then discussed at CoG. The Chair responded that the idea was to keep it as an open format so as not to create extra work for the governors. Richard Mills commented that the form that was previously used was prescriptive and asked if there was a more convenient way to collate the information.</p> <p>Action: It was agreed that a standing item on the agenda would be a good idea and that the corporate governance team would look at how to combine a verbal standard item alongside written feedback.</p>	<p>Corporate Governance Team</p> <p>Corporate Governance</p>
CoG 76/08	<p>Staff Survey Results Heather Smith, Non-Executive Director & Sarah Bawden, Deputy Director of People</p> <p>Heather Smith introduced Sarah Bawden, Deputy Director of People to CoG and presented the breakdown of the data from the latest national NHS England Staff Survey results. The results for the Trust were disappointing and it was clear that there was still work for the Trust to do to improve staff morale and satisfaction, but it was also acknowledged that the survey results come off the back of a difficult couple of years for the Trust following the CQC rating that put the Trust in Special Measures and the Covid19 pandemic.</p> <p>Heather Smith clarified that the 2022 report was based on 2021 data as the breakdown of data is not received until eight months after the</p>	

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	<p>survey has taken place. The results are then benchmarked against a comparative group, with the Trust being in a benchmark group with fifty-one other Trusts which all offer mental health, disability, or community services.</p> <p>Heather Smith noted that 52% of the Trust's workforce had participated in the staff survey, which is an increase of 11% from the previous year.</p> <p>A positive result from the survey data is that staff are more confident in being able to raise concerns relating to unsafe practice and this is something that has also been seen through the work of the Quality and Assurance Committee (QAC).</p> <p>Heather Smith noted that the survey data indicated that staff working at SHSC want to feel more valued - there are positive results seen from working within a team but not from employees' experiences of working across teams.</p> <p>Heather Smith explained that where the results haven't been ideal, the Trust is already taking action to address these areas of concerns, and an example of this is addressing the lack of breakout spaces for staff through the Estates Strategy - improving environments.</p> <p>Chris Digman asked if there are any improving trends in the data in comparison to previous years, particularly against the data for 2020. Heather Smith commented that in general the data does not imply an improved position. Sarah Bawden explained that the questions asked in the survey changed as the people promise was a new set of questions, but that where there is comparable data, it is possible to see a positive trend from 2017. Sarah Bawden added that although the overall picture is disappointing against the figures for the benchmark group, and do not always show an improving position, there were some positives in the results. For example, 73.5% agreed that their line manager works together with them to understand problems and address their concerns.</p> <p>Julie Kitlowski asked if SHSC has visited Trusts that are coming out at the top of the benchmarking data to see what work they are doing and to share best practice. Heather Smith explained that she has visited Mersey Care and Derbyshire Community Health Services, attending each of those Trusts' People Committees and that SHSC has adopted some of Mersey Care's ideas to work towards embedding a Just and Learning culture – the Board of Directors have had a session on Mersey Care's Just and Learning Culture and training is now being delivered to staff.</p> <p>Heather Smith explained that seeking advice and sharing best practice from other Trusts is something which SHSC is actively engaged with - SHSC had been learning from Derbyshire Community Health Services' work on Compassionate Leadership and the Board of Directors have had a session from the national lead on compassionate leadership. Sarah Bawden added that this work translates into sharing best practice across the Integrated Care System.</p>	

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	<p>Terry Proudfoot commented that the results are disappointing but when looked at in detail there are only two areas that are noticeably lower than the benchmarks.</p> <p>Terry Proudfoot asked if there was a further breakdown of the data available that showed which service area and teams were polling significantly lower than others.</p> <p>Heather Smith explained that the Trust does have a sense of which teams this affects. The Organisational Development Team are providing different input to teams across the organisation based on their needs to work towards addressing the issues of concern indicated by the lower scores. Sarah Bawden added that work is underway to understand the detail of the data and triangulate it accordingly, and that this would be taking place across the Trust on a wider and an individual team scale.</p> <p>Terry Proudfoot commented that historically there has been a lack of trust in SHSC leadership. Terry Proudfoot asked what the plans were for the Trust to gauge opinion on the changes and if there were plans for the Trust to hold People Pulse style surveys. Heather Smith explained that the latest NHS national People Pulse survey has recently gone live and that the results from this would provide information for the Trust to benchmark against. Beverley Murphy responded that that is possible to examine the data by professional group in addition to individual teams and services and the scores from individual teams are analysed so that targeted interventions are then put in place. An example of this is that Allied Health Professionals (AHPs) stood out as much happier in their roles than other staff groups and it is important to gain some more understanding of the reasons for this.</p> <p>Celia Jackson-Chambers asked whether the results from the survey indicated that staff were feeling anxious about the wide scale changes which are being implemented across the Trust, such as the change in bases for some staff and the changes affecting social care teams. Heather Smith acknowledged that this could have an impact but was unable to say for certain if this was the case and reiterated the need for higher participation from staff in the surveys in order for a more accurate reflection of views from its workforce to be received.</p>	
CoG 76/09	<p>Senior Independent Director Anne Dray, Non-Executive Director</p> <p>Anne Dray introduced herself as the Senior Independent Director and explained that she has been working with the Nominations and Remunerations Committee on the NED Recruitment project alongside members of CoG.</p> <p>Anne Dray explained that the Senior Independent Director is involved with the appraisal of the Chair and succession planning of the Chair when appropriate, in addition to looking into issues regarding the Board of Directors, although this is rare.</p> <p>Anne Dray welcomed the governors to contact her if they have anything they need to raise and explained that she is best contacted by phone or by contacting the Corporate Governance Team.</p>	
CoG 76/10	<p>Mental Health Legislation Committee Olayinka Monisola Fadahunsi-Oluwole, Non-Executive Director</p>	

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	<p>Olayinka Monisola Fadahunsi-Oluwole explained that the Mental Health Legislation Committee (MHLC) was established under the previous Chair, Mike Potts with a view to obtaining wider assurance as a Trust that the appropriate action was being taken to ensure compliance with the Mental Health Act, Mental Capacity Act, Liberty Protection Safeguards, the Deprivation of Liberty Safeguards and Human Rights Act.</p> <p>Olayinka Monisola Fadahunsi-Oluwole explained that she chairs the MHLC and the committee falls under the portfolio of Dr Mike Hunter who is the Medical Director for the Trust. The committee is also supported by Jamie Middleton, who is the Head of Mental Health Legislation.</p> <p>Olayinka Monisola Fadahunsi-Oluwole explained the Mental Health Act places a range of legal obligations upon the Trust, predominantly to ensure compliance with the Mental Health Act and that a patient's human rights are protected.</p> <p>Following the CQC inspection in August 2021 the Trust was informed that it needed to make improvements to its oversight of its statutory obligations in relation to the Mental Health Act. Olayinka Monisola Fadahunsi-Oluwole explained that the Mental Health Legislation Committee (MHLC) and the Mental Health Legislation Operational Group have been set up and both of these groups report to the Board. The Least Restrictive Practice Group report into the MHLC and meets quarterly.</p> <p>There are number of key issues which the MHLC is currently focused on. These include carrying out and documenting the Mental Capacity Assessments, ensuring there is documentation for Best Interest decisions and the documentation of risk assessments, thus meeting the legal requirements to give patients information about their detention and what rights they have to challenge their detention.</p> <p>The MHLC also monitors ways to improve the Trust's compliance with carrying out seclusion reviews in a timely manner and to ensure that increment standards are being met.</p> <p>Olayinka Monisola Fadahunsi-Oluwole explained that in 2022/2023, the MHLC aims to improve strengthening the covenants around mental health legislation so that the organisation is assured that it is meeting its statutory obligations. The MHLC is moving towards a new set of key performance indicators (KPIs) which reflect a wider range of mental health legislation.</p> <p>Olayinka Monisola Fadahunsi-Oluwole explained that the organisation is working with Associate Mental Health Act managers in relation to the anticipated changes to Liberty Protection Safeguards. Operational services will be supported and escalation supported as required.</p> <p>Billie Critchlow reflected on their own experiences as a carer with the Mental Health Act and asked what action SHSC is taking to ensure a consistent approach to its interpretation and implementation when dealing with service users. Olayinka Monisola Fadahunsi-Oluwole responded that the Trust had a subject matter expert in Jamie Middleton and that the Trust would continue to learn from incidents that occur. Beverley Murphy explained that the Trust works with</p>	

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	<p>Approved Mental Health Practitioners (AMPs) who are the people who are responsible for determining whether or not they would make an application to place somebody on a section under the Mental Health Act. They are staff who are employed by the local authority and they are independent, autonomous practitioners, who work into the organisation. The AMPs have a very rigorous CPD programme, but they are autonomous practitioners and although the principles of the act are always applied, each person's assessment is individualised.</p> <p>Beverley Murphy explained that the Mental Health Act Operational Group, consists of clinical directors and the doctors there from the clinical directorates, to ensure as much consistency as possible. The Trust is also making sure that newly registered nurses receive training in their first year of practice and reviewing the competencies to ensure that the Mental Health Act is applied consistently across the organisation.</p> <p>Celia Jackson-Chambers asked whether changes to the deployment of Local Authority employed practitioners will impact on the how the Mental Health Act is implemented in Trust services. Beverley Murphy explained that the responsibility and availability of the AMPs should not change as a result of the changes. However, the changes will mean that the Local Authority will have a far clearer and straightforward view into their practice. SHSC will continue to monitor any changes.</p> <p>Terry Proudfoot asked whether there are specific areas of concern that the MHLC is looking at. Olayinka Monisola Fadahunsi-Oluwole explained that the MHLC was looking at trying to reduce the number of incidents, the seclusion reviews and also aiming to identify possible breaches of the Act early. The Chair confirmed that after observing a MHLC meeting, it is apparent that there are issues that do get flagged in the meetings and then reported to Board of Directors.</p> <p>James Barlow questioned whether the MHLC would work with the council so that the knowledge and expertise could feed into the ongoing work of some practitioners or teams. Olayinka Monisola Fadahunsi-Oluwole explained that it is anticipated that the Trust and the Local Authority will continue to work closely together and Beverley Murphy confirmed that SHSC and Sheffield City Council would continue to work in partnership.</p>	
CoG 76/11	<p>Governor Elections Update Amber Wild, Corporate Assurance Officer Amber Wild reported on the Governor Election outcome.</p> <p>24 vacancies were up for election - some of these are seats are current vacancies that CoG have been carrying and some of these are seats that are governors ending their three-year term of office. One seat has been contested and this was for the public constituency for the Rest of England.</p> <p>UK Engage is working with the Trust as the election provider and the timetable for the elections is included in the report. Some existing governors (Johnathon Hall, Terry Proudfoot and Billie Critchlow) have stood for re-election and have been duly elected. The Trust has</p>	

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	<p>received four further nominees who will be new to the Council of Governors, and these new governors will be formally received at the June CoG meeting following a successful completion of all the fit and proper test, DBS and their Declarations of Interest. 16 vacancies remain following the election.</p> <p>Deborah Lawrenson explained that there would need to be a by-election for the staff vacancies.</p> <p>The governors were asked to note the updates and agree the recommended next steps.</p> <p>Deborah Lawrenson and the Chair explained that the Constitution was due for review in the coming months and tabled the motion to bring the review forward. It was explained that the number of seats on CoG was unusual for a Trust of this size.</p> <p>Deborah Lawrenson asked governors to prioritise their attendance at June's meeting as quoracy would be paramount to welcome newly elected members.</p> <p>Terry Proudfoot asked what the review of the Constitution will encompass. Deborah Lawrenson confirmed that due to changes following the pandemic the constitution would need to be reviewed to include the hybrid model of meeting, inaccuracies would be corrected and that it would be reviewed to ensure that it is developed in line with the model Constitution guidelines, and with Governor involvement.</p> <p>It was agreed that the review of the constitution be brought forward.</p> <p>Action: Deborah Lawrenson to plan a date for review of the Trust's Constitution.</p>	Deborah Lawrenson
CoG 76/12	<p>Any Other Business None</p>	
	CLOSE	

Dates of next Council of Governors meetings:
 Tuesday 14th June 2022, 2:30pm to 5pm
 October 2022, date and time to be confirmed
 December 2022, date and time to be confirmed
 February 2023, date and time to be confirmed