Board of Directors
28 November 2019

Paper title: Chair’s Report
Presented by: Cathy Elliott, Trust Chair
Prepared by: Cathy Elliott, Trust Chair

Purpose of the report
The Trust Board is asked to review the content of this report for information.

Executive summary
Briefing to the Board on the new NHSI/E recommended standard framework for NHS Foundation Trusts within which annual appraisals for NHS provider chairs are applied and managed.

Update on developments and engagement lead or co-ordinated by the Trust Chair since the last Public Board meeting and immediate future plans.

Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?

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<th>State below ‘Yes’ or ‘No’</th>
<th>If yes please set out what action has been taken to address this in your paper</th>
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Recommendation
The Trust Board is asked to:
- Note the content of the paper; and
- Seek any further clarification as appropriate.
### Strategic vision

Please mark those that apply with an X

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<th>Providing excellent quality services and seamless access</th>
<th>Creating the best place to work</th>
<th>Supporting people to live to their fullest potential</th>
<th>Financial sustainability growth and innovation</th>
<th>Governance and well-led</th>
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### Care Quality Commission domains

Please mark those that apply with an X

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<th>Safe</th>
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<th>Relationship to the Board Assurance Framework (BAF)</th>
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<td>Links to the Corporate Risk Register (CRR)</td>
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<td>Compliance and regulatory implications</td>
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NHS Improvement/England (NHSI/E) Chair Competency Framework

Briefing to Board

NHSI/E recommends from November 2019 a standard framework within which annual appraisals for NHS provider chairs are applied and managed. The principal aim is to ensure “the annual appraisal is a valuable and valued undertaking that provides an honest and objective assessment of a chair’s impact and effectiveness, while enabling potential support and development needs to be recognised and fully considered.”

NHS provider chairs will be appraised against the competencies of: Strategic; Partnerships; People; Professional Acumen; Outcomes Focus. Details on the expectations of demonstrating the competencies are outlined in Appendix One at the end of this report.

NHSI/E states that the appraisal framework is not intended to be prescriptive, and “while its broad principles should be reflected in local practices, chairs, senior independent directors and lead governors will wish to apply discretion in ensuring context-specific issues and requirements are given due prominence.” The completed appraisal reporting template should be forwarded to NHS Improvement’s Chair and Chief Operating Officer for review and regional director, for information and, if required, potential moderation will be undertaken. Further information, including appraisal templates are available here: https://improvement.nhs.uk/documents/6107/Provider_Chair_Appraisal_Framework_1nov.pdf

Next Steps

The Board is being informed of this at the November Board meeting and the Council of Governors will be informed at their next meeting on 12 December. Paul Hogg, Director of Corporate Affairs, and I informally briefed the Senior Independent Director (SID), Lead and Deputy Lead Governors last month.

To adopt and align with this recommendation:
- From this month I will set out my Public Board reports within the NHSI/E framework;
- From this month my initial objectives and personal development plan for the remainder of 2019/20 will be aligned with the framework, agreed with SID and the Lead and Deputy Governors;
- An initial six month appraisal review with the SID and the Lead and Deputy Governors in February/March 2020 will use this framework, including feedback from Governors and Stakeholders against the stated competencies;
- My objectives for 2020/21 will be aligned with the framework from April 2020 with an appraisal in March 2021.
The handover between Rob Vincent as the Trust’s current SID and his successor in spring 2020 will take into account this requirement.

**Chair’s Public Board Report**  
**October – November 2019**

**Strategic**

**Recent Activities**

The November Public and Private Board agendas cover the two recent areas of strategic work I have been leading on, including:

- the annual Board Away Day on 11 November and the related action plan, taking into account the findings from our recent Board self-assessment survey;
- and the Review of Board Committee activities from April, including the potential introduction of a Workforce Committee to meet the Trust’s and NHSI/E’s requirements.

This collective work across the Board aims to develop our assurance and risk management processes together as well as ensure Board’s strategic focus on the delivery of Better Lives, Together.

**Immediate Future Activities**

**Well-Led**: Following a planning meeting with Deloitte on 14 November, we will ensure their expertise is maximised at a Board development session in February next year to support the completion of our Well-Led plan with them over this year. These activities will take into account the results of our recent self-assessment survey and Board Away Day, and will lead to revising our Board Development Plan for 2020.

Our new Board Skills Matrix which I requested for last month is work in progress, though it has already informed our recruitment process for a new Non Executive Director (NED) early next year.
Partnerships

Partner Engagement

System-Working: The West Yorkshire and Harrogate Mental Health and Learning Disabilities Collaborative hosted a meeting for NEDs and Governors on 22 October in Leeds; thanks to the NEDs and Governors from the Trust who joined me and who professionally represented BDCFT that day.

Bradford City Council: Brent Kilmurray and I met with the Leader and Chief Executive Bradford City Council on 8 November to review our working partnership. Future ways of working and communicating were agreed as well having the opportunity for the Trust to address queries from elected members on the 0-19 and CAMHS services. I have suggested that regular meetings take place between the four of us from 2020 to develop our place based working partnership.

Voluntary and Community Sector: I requested meetings with the local Voluntary and Community Sector (VCS) as part of my induction and to support the development of the Trust’s work with the local VCS. I met with a forum of Mental Health VCS organisations on 5 November, hosted by Mind in Bradford, and attended the Bradford Assembly of VCS organisations on 18 November. VCS representatives acted as supporters and critical friends of the Trust, and BDCFT’s Paul Hogg and Catherine Jowitt will respond to VCS queries.

VCS leaders requested the Trust’s consideration of offering free training to them to help enhance their VCS practice, along similar lines to the Trust’s successful work with the Cellar Trust, and as a result the Trust is exploring dedicating a percentage of training from next year via Paul Hogg.

I proposed to the VCS developing a ‘jigsaw’ of pathways together to improve the transition for service users from prevention to ill-health to recovery services across the NHS and VCS. The VCS are positive about this opportunity and request we work together on pathways by type of service user and not by diagnosis. Pre-planning work has begun and we aim for a session to take place by March 2020, involving BDCFT staff.

Local Engagement
Recently I have represented the Trust at:

- The Power to Change engagement event for community businesses and the public sector on 14 October in Bradford;
- and met with Philip Davies MP (Shipley), along with Brent Kilmurray, on 15 October in London before the pre-election period.

Four other planned MP meetings have been postponed until after the general election. All engagement opportunities gave the opportunity to gain views from our local community to enhance our work and update stakeholders on the Trust’s work.
National Engagement

- I attended the national NHS Providers Conference on 8 October which has led to engagement with their Chief Executive Chris Hopson, linking with Brent Kilmurray’s new appointment to the NHS Providers’ Board;
- At our request, Brent and I met with Baroness Dido Harding, Chair of NHS Improvement (NHSI), on 15 October which has particularly led to being encouraged to consider in more detail our capital plans which came to the Private Board in October.

People

BDCFT Board Recruitment

Recruitment to Board level roles continues during autumn/winter and thanks to those staff, Governors and service users who are involved in these processes.

- **Audit Chair:** We held a Selection Day on 17 October for a new NED as Audit Chair with four short-listed candidates. The Fit and Proper Persons Test and formal approvals are currently taking place for our preferred candidate so that the new Audit Chair can begin in post by the December Board meeting. The preferred candidate has already informally begun a handover with the current NED as Audit Chair, David Banks. Our thanks go to David for his six years service to the Trust which has been greatly appreciated.

- **Medical Director:** We held a Selection Day for a new Medical Director on 8 November with one short-listed candidate, including a number of assessment processes in advance and on the day via an external recruitment agency and with the regional NHSI Medical Director. Formal approvals are currently taking place for the successful candidate so that the new Medical Director can begin in post by the December Board meeting.

- **NED Recruitment:** Planning has begun to recruit a new NED due to Rob Vincent retiring in February 2020. Information on the plans are available for Board from this month and the deadline for applications will be mid-January 2020.

I have asked NEDs to share with me their interest this month in future Board remits and roles from spring 2020, and further details will be shared shortly.

Other Recruitment

- **New Governors:** I led a new Governor Induction session on 29 October with the Lead Governor and BDCFT colleagues. We invited existing and new Governors to attend which provided an opportunity for both induction of new Staff & Public Governors, a refresher for existing ones and networking opportunities.
• **Hospital Managers:** I am working with Teresa O’Keefe, BDCFT Mental Health Act Advisor, on the recruitment of new Hospital Managers to increase the number of Managers available, including a public open evening at New Mill on 3 December. These specialist volunteering roles ensure the rights of people detained under the Mental Health Act.

**National Engagement**

At my request, Brent and I are meeting the national NHSI/E People team on 26 November in London, including Prerana Issar, Chief People Officer. In advance I have shared our Care Trust Away approach and nominated Abdul Khalifa, BDCFT Senior HR Business Partner, to join the new national BAME working group, linked to the People Plan. Brent and I will keep the Board updated on developments from these national discussions.

**Internal Engagement**

I continue to work to engage across the Trust as part of my induction and role as Chair, including attending parts of the leadership team’s business planning sessions; monthly service visits to CAMHS with the Board in October, to the Airedale Centre this month and to District Nursing next month; and joining the Clinical Excellence Awards panel this month.
Appendix One
NHSI/E Provider Chair Annual Appraisal
Framework

NHSI/E recommended standard framework within which annual appraisals for NHS
provider chairs are applied and managed:

Competency: Strategic
- Leads the board in setting an achievable strategy.
- Takes account of internal and external factors to guide decision-making sustainably for the benefit of patients and service users.
- Provokes and acquires new insights and encourages innovation.
- Evaluates evidence, risks and options for improvement objectively.
- Builds organisational and system resilience, for the benefit of the population of the system as a whole.

Competency: Partnerships
- Develops external partnerships with health and social care system stakeholders.
- Demonstrates deep personal commitment to partnership working and integration.
- Promotes collaborative, whole-system working for the benefit of all patients and service users.
- Seeks and prioritises opportunities for collaboration and integration for the benefit of the population of the system as a whole.

Competency: People
- Creates a compassionate, caring and inclusive environment, welcoming change and challenge.
- Builds an effective, diverse, representative and sustainable team focused on all staff, patients and service users.
- Ensures all voices are heard and views are respected, using influence to build consensus and manage change effectively.
- Supports, counsels and acts as a critical friend to directors, including the chief executive.

Competency: Professional Acumen
- Owns governance, including openness, transparency, probity and accountability.
- Understands and communicates the trust’s regulatory and compliance context.
- Leverages knowledge and experience to build a modern, sustainable board for the benefit of patients and service users.
- Applies financial, commercial and technological understanding effectively.
Competency: Outcomes Focus

- Creates an environment in which clinical and operational excellence is sustained.
- Embeds a culture of continuous improvement and value for money.
- Prioritises issues to support service improvement for the benefit of the population of the system as a whole, ensuring patient safety, experience and outcomes remain the principal focus.
- Measures performance against constitutional standards, including those relating to equality, diversity and inclusion.