# Board of Directors

*24 September 2020*

<table>
<thead>
<tr>
<th>Paper title:</th>
<th>Chair’s Report</th>
<th>Agenda item</th>
</tr>
</thead>
<tbody>
<tr>
<td>Presented by:</td>
<td>Cathy Elliott, Chair of the Trust</td>
<td>15</td>
</tr>
<tr>
<td>Prepared by:</td>
<td>Cathy Elliott, Chair of the Trust</td>
<td></td>
</tr>
</tbody>
</table>

## Purpose of the report

Chair’s Report to inform Board members on relevant strategic developments, external stakeholder and internal staff engagement, new publications of interest to inform Board work and relevant internal developments.

| For approval | For discussion | For information | X |
|--------------|----------------|----------------|

## Executive summary

This report particularly covers the following:

- Recommendations for Board to note in relation to Governance from the NHS Improvement/England (NHSI/E) Phase 3 Letter;
- The Trust’s continued development work to fulfil the Well-Led framework;
- Partnership & Stakeholder Engagement, including the West Yorkshire & Harrogate Committees in Common;
- Executive team changes, including our new Chief Executive joining and appointing a new Director of Finance & Estates.

<table>
<thead>
<tr>
<th>Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?</th>
<th>State below ‘Yes’ or ‘No’</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes please set out what action has been taken to address this in your paper</td>
<td>No</td>
</tr>
</tbody>
</table>

## Recommendation

The Board of Directors is asked to:

- Consider the recommendations highlighted for the NHSI/E Phase 3 Letter and the Trust’s compliance or developing plans to comply;
- Note information provided, including continuing work to fulfil the Well-Led Framework and Executive team changes.
### Strategic vision

Please mark those that apply with an **X**

<table>
<thead>
<tr>
<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>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>X</strong></td>
</tr>
</tbody>
</table>

### Care Quality Commission domains

Please mark those that apply with an **X**

<table>
<thead>
<tr>
<th>Safe</th>
<th>Effective</th>
<th>Responsive</th>
<th>Caring</th>
<th>Well Led</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>X</strong></td>
</tr>
</tbody>
</table>

### Relationship to the Board Assurance Framework (BAF)

The work contained with this report links to the following strategic risk(s) as identified in the BAF:

- Contributing towards -
  - Regulatory standards – 2.1
  - System Working – 4.1 and 5.2

### Links to the Corporate Risk Register (CRR)

The work contained with this report links to the following corporate risk(s) as identified in the CRR:

- 1826 – Lynfield Mount Re-Development

### Compliance and regulatory implications

The following compliance and regulatory implications have been identified as a result of the work outlined in this report:

- Well-Led Compliance
- Foundation Trust Code of Governance
- NHS Act
- Health and Social Care Act
- NHS England / Improvement Appraisal Framework for the Chair’s and Non Executive Directors
- Nolan Principles
- Provider Licence
Meeting of the Board of Directors  
24 September 2020  
Chair’s Report

Strategic

Responding to the NHS Phase 3 Letter

As the Board is aware, on 31 July 2020, NHS England and NHS Improvement (NHSI/E) set out the third phase of the NHS response to Covid-19 in a letter to all NHS organisations, GP practices and providers of community health services to which the Trust is responding. The letter has been supplemented by additional guidance which the Trust has taken on board.

Executive colleagues will report on the Trust’s financial, service and operational response to the Phase 3 letter. However, I wanted to highlight with Board members some of the Phase 3 Letter’s recommendations based on the pandemic’s learning so far at a governance and strategic level for Board consideration and adoption which are outlined below.

Phase 3 Letter - Tackling Inequalities

- Recommendation: “Accelerate preventative programmes which proactively engage those at greatest risk of poor health outcomes. This should include more accessible flu vaccinations, the better targeting of long-term condition prevention and management programmes, obesity reduction programmes including self-referral to the NHS Diabetes Prevention Programme, health checks for people with learning disabilities, and increasing the continuity of maternity carers including for BAME women and those in high risk groups.”

- Recommendation: “Strengthen leadership and accountability, with a named executive Board member responsible for tackling inequalities in place in September in every NHS organisation. Each NHS board to publish an action plan showing how over the next five years its board and senior staffing will in percentage terms at least match the overall BAME composition of its overall workforce, or its local community, whichever is the higher.”

As shared in my July 2020 Public Board report, we have changed as of this month the diversity of our Board from 14% to 42% of NEDs (three NEDs) now from BAME backgrounds and 7% to 30% (four members) of voting Board members or 25% of Board members overall from a BAME background in 9 months. As we know, this has been supported by having diverse representation in recruitment panels and having heavy weighting on experience and impact in equality, diversity and inclusion in the interview process. **The diverse membership of the Trust’s Board now reflects the population of Bradford, Airedale, Wharfdale & Craven which we serve.**
To note, in terms of Bradford’s population “the largest proportion of the district’s population (63.9%) identifies themselves as White British. The district has the largest proportion of people of Pakistani ethnic origin (20.3%) in England.” Source: Bradford Council, September 2020 I encourage the Board to collectively take responsibility for tackling inequalities, building on our current community collaborative and place-based work and explore future ways of working strategically and operationally.

**Phase 3 Letter - Working in Partnership**

- Recommendation: “Collaborative leadership arrangements, agreed by all partners, that support joint working and quick, effective decision-making. This should include a single STP/ICS leader and a non-executive chair, appointed in line with NHSE/I guidance, and clearly defined arrangements for provider collaboration, place leadership and integrated care partnerships.”

- Recommendation: “Organisations within the system coming together to serve communities through a Partnership Board, underpinned by agreed governance and decision-making arrangements including high standards of transparency – in which providers and commissioners can agree actions in the best interests of their populations, based on co-production, engagement and evidence.”

As the Board is aware, the **Trust is a member of the West Yorkshire & Harrogate (WY&H) Partnership Board** which is the region’s Integrated Care System (ICS) with representation from myself as Trust Chair and our Chief Executive, working toward aligning our work with the WY&H regional strategy which was approved earlier this year. **The Trust is a member of the WY&H Committees in Common** with three other trusts with oversight of transformation of mental health, learning disabilities and autism (MHLDA) of which I am Chair for the next 12 months. Details on the WY&H Partnership are here: [https://www.wyhpartnership.co.uk/about](https://www.wyhpartnership.co.uk/about)

**The Trust is also a member of the local Bradford & Craven Health & Wellbeing Executive Board**, working with two other NHS trusts, the Clinical Commissioning Group and Bradford Council on developing an ‘Act as One’ place based plan, and plans for future local governance were presented by the local CCG on 18 September for consideration by all involved. The Trust is also developing a community collaborative with Primary Care Networks which will be reported on at the September Public Board meeting by Chief Operating Officer Patrick Scott, and our new Chief Executive Therese Patten will hold an informal Board discussion session on 24 September on our approach to partnering, in line with our strategic plan, Better Lives, Together.

**Future of System Working**

The Board is to note a number of developing policy recommendations for health and social care system working, including the NHSI/E Phase 3 Letter and the new
devolved health recommendations report from the Health Devolution Commission Report which recommends:

- A new Common Framework and a rapid joint implementation Programme
- Produce a new Partnership Compact for working with key stakeholders
- Establish parity of esteem between physical and mental health funding


Outcomes Focused

Our Well-Led Journey

The Trust continues with its Well-Led development journey by working with Make it Happen (MIH) Solutions on a desktop review, Board development session and coaching sessions for Board members. This builds on the Deloitte independent Well-Led review during 2019/20 and the Board’s own self-assessment in late 2019. Today’s meeting includes an update report from Paul Hogg, Director of Corporate Affairs which outlines further the Trust’s current work, including a review meeting of the work in November between the Board and MIH Solutions. We welcome MIH Solutions’ feedback on our best practice in ensuring connectivity with Board via our incident Gold Command structure and our planned virtual service visits during the pandemic since March this year both of which we continue to develop based on learning.

Partnerships

WY&H Committees in Common

The Interim Chief Executive, Patrick Scott and I attended the WY&H Committees in Common meeting in July to represent the Trust on regional service transformation. A summary of the eight core workstreams in the MHLDA programme, supported by three enabling workstreams is attached as an appendix for Board review, including reflecting on the current impact of COVID-19 and where ‘business as usual’ work has been able to recommence.

As the new Chair of the W&H Committees in Common I gained agreement on and facilitated a strategic review virtual session with Chairs and Chief Executives involved in MHLDA transformation on 9 September. This session included a briefing on the WY&H Partnership’s future plans from Ian Holmes, Partnership Director, and Helen Hirst, CEO of Bradford & Craven CCG and as regional commissioning lead for mental
health. Agreed future strategic plans will be developed at the Committees’ next meeting in October. I also arranged and facilitated a discussion between the Chairs of the MHLDA regional group this month to agree future plans for a Non-Executive Director (NED) and Governor engagement programme, including a virtual session on 27 November which BDCFT NEDs and Governors are invited to join.

**Working with the VCS**

As a follow-up to the VCS & Trust conversation event on 10 March, I shared with a working group of VCS leaders a final draft summary report in July on the event’s content and recommendations, working with Trust colleagues. This report aims to complement the Trust’s Learning Week during COVID-19 which took place between the VCS and the Trust in July.

**Governor Engagement**

Recent Governor Engagement:

- Governors have been observing the Board virtual service visits, including during August and September, and thanks to those Governors who have joined us;
- Governors observed the Board meetings in Public in June and July;
- We held another Virtual Governor Open House Session on 27 July, focusing on the CQC Emergency Support Framework as well as providing a briefing on the Trust’s response to the pandemic, followed by a Question & Answer (Q&A) session.

Future Engagement Opportunities for Governors includes:

- Observing the virtual September Public Board meeting on 24 September, 9am – 1pm via MS Teams;
- Attending the Trust’s Virtual Annual Members Meeting on 29 September, 3pm – 4.30pm via MS Teams, including a QA session online;
- Attending a Virtual Open House Session on the Trust’s Community Collaborative with local GPs on 29 September, 4.30pm – 5.30pm via MS Teams, including a QA session online;
- Attending the West Yorkshire & Harrogate Health Partnership Non Executive Director & Governor Virtual Briefing event, 27 November, 9am – 1pm, via MS Teams.

**MP Engagement**

I briefed local MPs in July on the Trust’s developing capital plans for the Lynfield Mount in-patient services site. My most recent quarterly briefing to local MPs on the work of the Trust was distributed electronically in early August, including a revision to the way
the Trust manages MP enquiries on behalf of constituents to improve the process, working with Interim Chief Executive Patrick Scott.

**National Engagement**

I continue to attend, contribute and on occasions facilitate national virtual sessions. This includes this month joining the Mental Health Network’s weekly virtual discussion group for Trust Chairs; attending the NHS Providers’ national briefing from Baroness Harding on Track & Trace and their consultation on the future of NHS legislation; and chairing a Good Governance Institute virtual session for NHS NEDs on community engagement.

---

**People**

**Change in Chief Executive Role**

This month we welcome Therese Patten as our Chief Executive from 21 September, following an open recruitment process earlier this year. On behalf of the Board I would like to wish Therese every success in her new role. Our substantive Chief Operating Officer, Patrick Scott will step down from the Interim Chief Executive role by 21 September, following a two week handover, and on behalf of the Board I would like to thank him for the leadership of the Trust over the summer months. Patrick will become Deputy Chief Executive of the Trust as our Director of Finance, Estates & Performance Liz Romaniak moves on from the Trust to a new role in the North East next month. Thanks to our Nominations Committee for their support of these plans.

**Enhancing Board Level Recruitment**

Learning from recent Board level recruitment is being captured, including the development of a single operating procedure across Human Resources and Corporate Governance, and for Board information, a learning case study in Appendix One of this report from Just R Ltd which works with the Trust to innovate our recruitment processes to reach new audiences, including on our Chief Executive recruitment. As a result, our Director of Human Resources and Organisational Development is exploring new recruitment approaches with colleagues and Just R Ltd, especially with our EDI agenda in mind.

**Board Development Programme**

Training and development for the Board continues into the autumn, building on the independent review and support from MIH Solutions and learning from the virtual format of the Board’s Mental Health Act and Mental Capacity Act training in summer 2020. In the autumn/winter our planned training will cover corporate manslaughter and health and safety.
Equality, Diversity & Inclusion

The Board continues to develop is work in achieving equality, diversity and inclusion (EDI), including Board facilitated EDI sessions with staff representatives of staff with protected characteristics twice a month.

Our Director of Finance, Estates & Performance Liz Romaniak has been interviewed this month for the Women on Boards report on women in health leadership. The report can be found on the NSH Confederation website: https://www.nhsemployers.org/~/media/Employers/Publications/NHS%20Women%20on%20Boards%20report.pdf

The report is very comprehensive and has some clear recommendations both for national level and for individual Chairs and trust boards which the Trust will review. It has been endorsed by Prerena Issar, Chief People Officer for NHS England and NHS Improvement, and by Amanda Pritchard, CEO NHS Improvement.

Recruitment for our next Director of Finance, Estates

The final recruitment stage for this new Executive role took place on 14 and 15 September, followed by a Nominations Committee on 16 September to approve the appointment of the preferred candidate. Wider communications on this Executive appointment will be shared shortly across the Trust and with partners. Thanks to all involved with the recruitment process, including staff, Governors and external partners.

Virtual Service Visits

Board level virtual service visits continued during August and September across our care groups. In particular, I attended a virtual visit with our Core CAHMS team this month, alongside our substantive Director of Nursing. Learning gained from this developing format of Board virtual visits has been shared with Governance colleagues to ensure an enhancement of the visit format into the autumn.
APPENDIX ONE

Case study: Executive recruitment for Bradford District Care NHS FT
Source: Just R Ltd

“Seeking out senior hires through a digital recruitment strategy is an innovative and forward-thinking approach to building an executive team - one that many public healthcare organisations may be apprehensive about trialing.

Historically, C-suite and executive management positions have been filled by headhunters, or traditional recruitment agencies; prospective candidates are approached individually by costly specialists.

By adopting a digital approach, NHS trusts can widen and diversify their pool of potential candidates for a role, however senior. They may attract the attention of passive jobseekers who fit the criteria but would otherwise have never heard about the opportunity on offer. In addition, the profile of the Trust is raised through a tailored advertising campaign promoting the USPs, vision and values of the organisation.

With a digital approach, each campaign is created to fit the individual needs of each role, by an external team of specialists who can create engaging, bespoke imagery and written content.

The Challenge:

Bradford District Care NHS Foundation Trust (BDCFT) provides award-winning, high-quality mental health, community and learning disability services to a far-reaching community of all ages.

The Trust team had previously worked with Just R Ltd to create digital recruitment campaigns for clinical staff across several specialties, so when the time came to hire both a Chief Executive Officer and a new General Manager for Mental Health Services, the Trust made the forward-thinking decision to engage with Just R to help recruit to these two senior roles. Just R Ltd was uniquely appointed to complement existing internal or externally appointed search and selection processes. Each campaign would require a bespoke engaging and unique approach, encouraging those with the specific
relevant experience to apply and offering a steady stream of information to prospective candidates over the course of a month.

**Strategy and Tactics:**

BDCFT was keen to promote their vision and values, their commitment to diversity and the close-knit team that the successful applicants would become part of, through each campaign.

Just R worked closely with key stakeholders at the Trust to ensure these messages, plus additional Trust USPs and career opportunities at Bradford, were highlighted through a campaign which centred around the Trust’s slogan ‘Better Lives, Together’.

As part of the content creation, Just R held day-long photography, interview and videography sessions for each campaign which helped to create a series of images, GIFs and videos to promote the Trust’s USPs.

This content was featured throughout each campaign to offer short, engaging soundbites about working within the Trust, in Yorkshire and as part of the executive committee.

Additionally, the CEO campaign also included the creation of a bespoke 16-page brochure, offering a welcome from the Trust Chair. The brochure featured stunning imagery, accompanied by the recognisable, refreshed branding, plus a full and clear job specification, details on living and working in the local area, and further information for applicants.

**Outcomes:**

Specific results from the CEO campaign reached in excess of 100,000 people. The General Manager campaign yielded impressive results, reaching 207,362 people, and of these, 3,826 people engaged with the campaign over one month and 12 enquiry forms were completed over the campaign.

These results indicate that recruiting for key, senior positions within a Trust, can be successfully achieved through a tailored digital campaign. Refreshed, updated branding was consistently featured across two high profile campaigns, alongside bespoke video, imagery and written content, culminating in a unique and seamless digital experience for passive jobseekers.”