

# Board of Directors

8 July 2021

<b>Paper title:</b>	Trust Chair's Report	<b>Agenda item</b>  <b>8</b>
<b>Presented by:</b>	Cathy Elliott, Chair of the Trust	
<b>Prepared by:</b>	Cathy Elliott, Chair of the Trust	

Purpose of the report		
Chair's Report to inform Board members on relevant strategic developments, system and Well-Led governance developments, integrated care partnership working, external stakeholder engagement, activities with the Trust's Council of Governors, and internal staff engagement and Board visibility via Go See visits.	For approval	
	For discussion	
	For information	<b>X</b>

Executive summary		
<p>This report particularly covers the following:</p> <ul style="list-style-type: none"> <li>• Thanks to staff work at this exceptional time during the pandemic as we celebrate the NHS' 73<sup>rd</sup> Birthday on 5 July;</li> <li>• Care Quality Commission (CQC) Well-Led review work continues;</li> <li>• Developing strategic plans in relation to the Government's White Paper on integrated care and our long-standing partnership working;</li> <li>• Engagement with the Council of Governors;</li> <li>• Board appraisal process concluded and supported by Governors.</li> </ul>		
Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?	<p><b>State below 'Yes' or 'No'</b></p> <p><b>No</b></p>	If yes please set out what action has been taken to address this in your paper

Recommendation
<p><b>The Board of Directors is asked to:</b></p> <ul style="list-style-type: none"> <li>• Note the Board's and the Trust's preparation work for a review with the Care Quality Commission (CQC) against their Well-Led Framework;</li> <li>• Note the Board's continued strategic work from 29 April this year on system working and responding to the Government's White Paper on integrated care, against our Better Lives, Together 2019 – 2023 strategy;</li> <li>• Note the Trust's external work at a senior level in system working and integrated care, leading up to key system milestones in October this year and April next year;</li> <li>• Note partnership working and external senior stakeholder engagement;</li> <li>• Note engagement with and developments for the Trust's Council of Governors;</li> <li>• Note continued engagement with staff for Board visibility via virtual methods and forums due to Covid-19 restrictions and a new programme of Go See visits via the Trust's Framework;</li> </ul>

- Note the appraisal process for Board members has concluded with the necessary reporting and Board objectives setting for 2021/22 which have been supported by the Council of Governors and Board during June and July.

<b>Strategic vision</b>				
Please mark those that apply with an X				
<b>Providing excellent quality services and seamless access</b>	<b>Creating the best place to work</b>	<b>Supporting people to live to their fullest potential</b>	<b>Financial sustainability growth and innovation</b>	<b>Governance and well-led</b>
				X

<b>Care Quality Commission domains</b>				
Please mark those that apply with an X				
<b>Safe</b>	<b>Effective</b>	<b>Responsive</b>	<b>Caring</b>	<b>Well Led</b>
				X

<b>Relationship to the Board Assurance Framework (BAF)</b>	<p>The work contained with this report links to the following strategic risk(s) as identified in the BAF:</p> <p>Contributing towards -</p> <ul style="list-style-type: none"> <li>Risk 3: If we do not equip people to deliver quality improvement locally, we will be unable to identify and embed organisational learning and this will have a negative impact on the quality of care.</li> <li>Risk 4: If we do not have leaders at all levels in the organisation, staff and patient experience will be negatively impacted. If we do not value and support inclusivity, we lose the opportunity to benefit from the full range of views, opinions and experiences when supporting staff and delivering care.</li> <li>Risk 5: If we do not develop effective partnerships across place, ICS and beyond we will be unable to support the voice of our service users and communities being heard in the planning and delivery of care. We will lose the opportunities to deliver the right care in the right place at the right time to address the full range of people’s needs.</li> </ul>
<b>Links to the Organisational Risk Register (ORR)</b>	<p>The work contained with this report links to the following corporate risk(s) as identified in the ORR:</p> <ul style="list-style-type: none"> <li>Risk 1826 on system working for mental health services.</li> <li>Risk 2370 on demand management.</li> </ul>

	<ul style="list-style-type: none"> <li>• Risk 2417 relating to the regulator</li> <li>• Risk 2437 relating to pandemic related pressures</li> </ul>
<p><b>Compliance and regulatory implications</b></p>	<p>The following compliance and regulatory implications have been identified as a result of the work outlined in this report:</p> <ul style="list-style-type: none"> <li>• Well-Led Compliance</li> <li>• Foundation Trust Code of Governance</li> <li>• NHS Act</li> <li>• Health and Social Care Act</li> <li>• NHS England / Improvement Appraisal Framework for the Chair's and Non Executive Directors</li> <li>• Nolan Principles</li> <li>• Provider Licence</li> </ul>

**Meeting of the Board of Directors  
8 July 2021  
Trust Chair's Report  
Public Meeting of the Board of Directors**

*Thank you to all of our staff and partners who continue to work together in challenging times during the pandemic, including our Chief Executive and Executive Management Team.*

*As a Board team we especially took the **opportunity to thank our staff and volunteers for their hard work and dedication via our annual You're a Star Awards on 25 June.** The ceremony was held for the second time online due to pandemic restrictions and broadcast on YouTube, and was then available as a recording via SharePoint staff intranet afterwards.*

*The Trust took part in the **NHS Big Tea Day on 5 July**, supported by Morrisons nationally, which also marked the **73<sup>rd</sup> Birthday of the NHS** with Trust celebrations across our internal communications platforms, including Board members taking part in a live Broadcast and Q&A for staff on 6 July.*

## **Strategic**

### **Board Strategic Planning for Integrated Care**

The Board is working together on the **outputs from our Strategic Development Session on 29 April** this year to review and agree next steps in responding to the Government's White Paper on integrated care and aligning it with the Trust's strategic plan, Better Lives, Together. The Chief Executive's report outlines strategic development work taking place, including the refresh shortly of the Trust's 2019 – 2023 strategic plan to be completed by the autumn, demonstrating achievements to date and the continuation of robust plans to deliver, alongside our integrated care partnership work. **The Board continues to support Better Lives, Together as a credible strategy** to deliver high quality sustainable care via our aims of Best Place to Work, Seamless Access to Care, Healthy as Possible and Best Quality Services. The Board backs the strategy's clear vision of connecting people to the best quality care, when and where they need it, and be the best place to work, supported by our values of We Care, We Listen, We Deliver. Thanks to all Board members for agreeing to work together as a Unitary Board team, including in informal working groups to take forward our plans, especially to ensure Better Lives, Together has impact not only in the Trust, but also outside of the organisation as we work increasingly in partnership. Updates on this work will be shared at the next Public Board meeting in September this year via the Trust Chair and Chief Executive's reports, in line with Integrated Care Partnership (ICP) and Integrated Care System (ICS) milestones in October this year and April next year.

## **Governance Working in Partnerships & Systems**

The Trust continues to be a proactive and engaged member of the established Bradford District & Craven Integrated Care Partnership (ICP) and West Yorkshire & Harrogate Integrated Care System (ICS). The Chief Executive's reports to Private and Public Board this month outline especially the Trust's engagement with and work at ICP level, alongside the ICP's plans by April next year to respond to ICS and national NHS guidance on statutory arrangements for an ICP, including via an ICP Development Framework developed within our ICS.

Governance arrangements at ICP and ICS levels are in development to ensure connectivity and alignment, building on the good practice of partnership working of at least three years. **Of note to Board are the ways in which the Trust at Board level is engaging with integrated care governance which are outlined below.**

### **ICP Level:**

- I as Trust Chair being a member of a **new Non Executive and Elected Officials ICP Advisory Group**, working with the Chief Executive of the Clinical Commissioning Group as place lead, on the development of ICP governance and statutory arrangements, linked to work outlined below. The group met virtually for the first time on 17 June, following the Act as One ICP virtual event in March this year for Non Executives and Elected Officials;
- The Trust's Chief Executive is also involved in developing ICP plans, especially via the ICP chief executives group and holding the Co-Senior Responsible Officer (SRO) role for the ICP's community services.
- Trust Board Secretary, Paul Hogg, is the Chair of the **Bradford District & Craven ICP working group for place based integrated care governance**;
- Deputy Chief Executive and Chief Operating Officer, Patrick Scott, is an active member of the **ICP Design Group**. The Group is especially developing the next iteration of the ICP Strategic Partnering Agreement (SPA) which was first approved by Board in 2019, and then approved a revised version in April this year. The next version will be presented to Board in October this year for approval which will inform statutory arrangements coming into place in shadow form in October and in full by April next year.

### **ICS Level:**

- **ICS Statutory arrangements** are currently being developed in line with the Government's White Paper and subsequent and related NHS national guidance. As Trust Chair I am **currently the Co-Chair of the ICS Reference Group** with the Leader of Calderdale Council for a time-bound group of around 15 NHS Chairs and Council Leaders that advises the ICS Team, including Rob Webster, Interim ICS Chief Executive, on plans for ICS Statutory Board and related arrangements. The Group meets monthly and advises on a variety of ICS plans – please see the Partnership section.
- The Trust's Chief Executive is also involved in developing plans, especially via the ICS mental health chief executives group.
- The **ICS' Partnership Board** which was established in 2016 continues with Chief Executives and Chairs or Elected Leaders of NHS trusts and local councils being members of this group, covering Bradford District and Craven, Calderdale, Harrogate, Kirklees, Leeds and Wakefield. The Partnership Board

sets the strategic direction of the ICS and meets quarterly, currently chaired by the Leader of Calderdale Council. The Chief Executive and I as Trust Chair are members of this Board.

- **Continuation of the Committees in Common (CinC) for the Provider Collaborative** for mental health, learning disability and autism (MHLDA) specialist service transformation which was set up in 2018, involving the Chairs and Chief Executives of four NHS trusts across the ICS, including BDCFT. I am currently the Chair of CinC until January next year, handing over to another NHS chair due to the rotational chairing basis for CinC. As Board members know, CinC is linked to our Trust Committee structure, and a Triple-A CinC report is now brought to Public Board after each quarterly CinC meeting, having been encouraged by me as CinC Chair this year, aligning governance reporting with the three other trusts. This Provider Collaborative will link more formally with the ICS' statutory arrangements by April next year once the ICS statutory Board is formed as well as wrap-around ICP ways of working.

## **Outcomes Focused**

### **Compliance with the CQC's Well-Led Framework**

As the Board is aware, we are currently preparing for a **broader Well-Led Review with the Care Quality Commission (CQC)**. As previously mentioned, the Trust has not had a formal CQC Well-Led review since February 2019, and is currently rated 'Requires Improvement' for Well-Led. The formal review has been delayed since last year due to the pandemic, though engagement with our CQC Relationship Manager regularly takes place via the Executive Team, including on 8 March this year for a Well-Led progress update. This engagement on 8 March included an evidence of progress and ways of working presentation by the Executive Team, led by the Chief Executive, with me as Trust Chair, and also our submission of evidence against 69 questions sent by the CQC to demonstrate ways in which we meet the Well-Led Framework and our progress since 2019.

The Trust's next phase of Well-Led work is being led by Beverley Fearnley, Deputy Director of Patient Safety, Compliance and Risk, working with all Board members and our Senior Leadership Team to support our staff and services. Preparation work includes evidencing our work against the Well-Led Key Lines of Enquiry, alongside areas of celebration and pride, including our Care Trust Way methodology for Quality Improvement which was short-listed for a national HSJ award this year.

More information on the CQC's Well-Led Framework is available here [NHS England » Well-led framework](#) and the CQC's current focus on reviewing NHS mental health trusts is here [Update on CQC's regulatory approach | Care Quality Commission](#)

### **Board Transition Week Session**

The **Board held a virtual reset and recovery planning session on 10 June** this year. This session was part of an overall **Transition Week the Trust undertook during 7 – 11 June with our workforce**, led by our Deputy Chief Executive and Chief Operating Officer, Patrick Scott, working with our KPO team, including Chris Hunt, and also Joanne Gott from the Trust. This team enabled the Trust that week to

have opportunities for learning & reflection from the pandemic and have a focus on continuous improvement across the organisation. The Board session on 10 June used our Care Trust Way methodology, reflecting on our practice and learning in the last 15 months during the pandemic, noting that our work as a Unitary Board team and our related governance and risk management arrangements have strengthened during the pandemic via continued engagement and Unitary Board team work. The session resulted in plans for Board work into the second half of 2021/22 as well as ways to support the reset and recovery plans of our workforce and services. Thanks to Patrick Scott and his colleagues for their leadership and innovative ways of working, including a virtual Broadcast and live Q&A at the start and end of the Transition Week to engage and inform staff. The Transition Week demonstrated how the Trust involves staff to support high quality sustainable services.

### **Delivery of the Trust's Covid Vaccination Programme**

As shared with the Council of Governors at their meeting on 1 July, I wish to highlight with Board also the **continued effective planning and delivery of the Trust's Covid vaccination programme since January** this year against changing national guidance. Board is aware that our delivery is via the Trust's Lynfield Mount hub for local healthcare and public sector workers which has just wound-down after second-dose vaccinations, and also the Trust's community vaccination centre (CVCs) sites at Bradford Old College Building and Jacob's Well for the general public. Our work continues in line with the national Joint Committee on Vaccination and Immunisation (JCVI) vaccination categories, adapting as different vaccines need to be provided for different age groups. The Trust's CVC team has evidenced via Committee and Board level reporting that they are maintaining high standards and quality improvement through our Care Trust Way methodology, and that there are clear and effective processes for managing risks and issues, responding proactively to Friends & Family Test and Council of Governor feedback. The Trust's CVC delivery is supported by an ad hoc Board Assurance Committee, chaired by me, in line with the Trust's Constitution during an incident, and is recorded at the relevant Board meetings and Committees.

To note the **Board Assurance Group met virtually on 28 June this year to review and approve the use of multiple vaccines** at Bradford Old College Building and Jacob's Well CVC sites, including the approval to use the Moderna vaccine for the first time, alongside the Astra Zeneca and Pfizer vaccines, against the Trust's Standard Operating Procedure. The ratification of this decision is reported separately to Board this month. To note NHS England/Improvement (NHSE/I) signed off the Trust's assurance documentation on 29 June to enable delivery. **Thanks to our Director of Nursing & Professions, Phil Hubbard**, and her team for working so professionally and proactively on CVC delivery with robust systems and processes for learning and continuous improvement.

### **Lynfield Mount Capital Plan**

As previously mentioned, briefings have been offered to key external stakeholders on the latest plans for our Lynfield Mount capital development, led by me as Trust Chair with the Chief Executive and Director of Finance, Contracting & Estates. These

virtual briefings have taken place since April this year with key opinion formers, including local MPs, the NHSE/I Regional Director and the national Mental Health Network recently.

We continue to seek the approximate £70m in funding to fulfil the Lynfield Mount capital project which can begin as soon as funding is received. We have local ICP and regional ICS backing of the capital project as a priority from health and social care partners. As you know, we submitted plans last year to NHS England and the Department of Health & Social Care for consideration and are waiting to be informed by them of future bidding opportunities, such as the '8 Hospitals' opportunity (timescale unknown). As you know, we are developing plans at risk currently, backed by Board, for the re-design and capital development of the Lynfield Mount site to create modern mental health facilities for the communities we serve. The design is guided by our service users to support high-quality sustainable services for the new development. The development will be built with the reduction of our carbon footprint in mind.

## **Partnerships**

### **ICP for Bradford & Craven**

As mentioned earlier in this report, as Trust Chair I joined a **new Non Executive Director (NED) and Elected Officials Advisory Group** which met in June to be briefed on and to discuss ICP statutory plans for Bradford District & Craven, including aligning with a West Yorkshire & Harrogate created ICS Framework for all ICPs to review and benchmark their plans by this September. The Group aims to meet again in advance of the next iteration of the ICP SPA for approval in October.

### **WY&H Committees in Common (CinC) for Mental Health, Learning Disabilities & Autism (MH,LD&A)**

The Trust's involvement with the established Provider Collaborative CinC of four MH,LD&A NHS trusts includes the following:

- **The recent CinC quarterly meetings, including in April and the next meeting on 22 July** this year with Chair and Chief Executive representation to review service transformation plans to go live later this year, including for Assessment Treatment Units (ATU) for which the Trust is the Lead Provider. An assurance report from the July CinC meeting will be brought to the September 2021 Public Board meeting in line with assurance reporting across the four NHS trusts;
- As CinC Chair I facilitated and hosted the **CinC six monthly briefing session on 11 June** across the four trusts for NEDs and Governors. The session included a briefing on the new ICS health & wellbeing hub for all health & social care staff in the ICS across all sectors, hosted by BDCFT, and an open discussion on the role of Governors and citizens in the Government's proposed integrated care plans. Thanks to those BDCFT NEDs and Governors for attending and contributing to the virtual event. These six monthly sessions demonstrate how the Collaborative involves



people who use services, members of the public and external partners to support high quality sustainable services.

Information on the ICS health & wellbeing hub can be found here: [West Yorkshire and Harrogate Partnership :: New mental health wellbeing hub for health and care workers across West Yorkshire and Harrogate goes live \(wyhpartnership.co.uk\)](https://www.wyhpartnership.co.uk)

## **WY&H ICS**

- As Co-Chair of the **WY&H ICS Reference Group** I chaired the **monthly meetings on 28 May and 25 June, working with the Group to advise the ICS team on their plans in responding to the Government's White Paper**. The meetings in May and June covered ICS Board and related governance arrangements, an ICS owned ICP Development Framework for all places, the ICS' clinically-led approach and the ICS People Plan to be formed by the end of July. As mentioned, I share the Chair role with Cllr Tim Swift, Leader of Calderdale Council and Chair of the ICS Partnership Board. I was previously nominated by our ICS Provider Collaborative CinC members to represent MH,LD&A as ICS CinC Chair at the Reference Group and I continue also with this representation.

## **National Engagement**

- I continue to be a member of the **NHS Providers (NHSP) Member Reference Group on NHSP's response to the Government's White Paper**, engaging with their senior staff and Policy team.
- I was an **invited panellist for a NHSP national seminar on Provider Collaboratives** on 24 June this year which was attended by around 60 NHS leaders and policy officers, sharing our ICS work as best practice in my role as CinC Chair and as BDCFT Chair. This event linked to an interview Keir Shilliker from the ICS team and I gave to NHSP on the work of our ICS' CinC which has been featured this month in a national NHSP report on how Provider Collaboratives deliver, which can be found here: [Providers Deliver: Collaborating for better care \(nhsproviders.org\)](https://www.nhsproviders.org)
- As Trust Chair I continue to be **a member of a NHSE/I national working group for a national review of required NED remits** to ensure consistency and appropriateness of remits for part-time NED Board roles in the NHS. As previously mentioned, the group is chaired by the national NHS Improvement (NHSI) Deputy Chair Andrew Morris, involving four Chairs from across the country, including Max McLean from Bradford Teaching Hospitals NHS Foundation Trust and me. From this work, there are **virtual NHSI/E engagement sessions** with trusts taking place to inform national future plans. **NHSE/I held a session with our Trust on 1 July** this year which NED Carole Panteli and I attended, including **sharing example BDCFT NED remit documentation with them, including our Trust Board Skills Matrix**, as examples of practice for their review. **I will join the national working group**

**on 9 July for a virtual discussion with the CQC national team**, including Kevin Cleary of CQC, supporting NHSE/I's aim to align the national review with the CQC's work.

- I was an **invited panellist for a national virtual NHS Confederation conference** breakout session on 17 June this year on the topic of responding to the increased demand for mental health services, hosted by the national Chief Executive of the Mental Health Network. Thanks to our Medical Director, David Sims, and to colleagues across our MHLDA Provider Collaborative for their support with preparations, including Sean Rayner, Director of Provider Development, from South West Yorkshire Partnership FT.
- I was the **invited chair and contributor for a virtual national Good Governance Institute (GGI) session on 26 May this year on the citizen's voice** in integrated healthcare partnership working which was attended by around 80 representatives of healthcare organisations and policy makers.

## People

### Board Visits & Workforce Engagement

Plans and activities continue as usual to ensure Board visibility across the Trust via staff and service engagement and visits. These activities enable the Board to gain insights across the organisation, aiming to ensure a culture of high-quality, sustainable care and no issues relating to a closed culture in a service that could increase the risk of harm. In-person and virtual service visits have been undertaken by Board members during 2020/21 and now into 2021/22, adapting throughout the pandemic in a variety of ways, building on our in-person Board visit practice in 2019/20, observed by Governors.

Whilst observing Infection Prevention guidelines and the Government's Roadmap out of the pandemic, these current Board activities include:

- **The next programme of Board visits against our Go See Framework** which began in May this year with joint Executive and NED visits in-person and virtually. The Board's Go See Framework supports Board visibility and service engagement, linked to the CQC's Well-Led framework. An **overview of the current programme is at the end of this report in Appendix One** and includes night visits to services from this month by our Chief Executive and Director of Nursing & Professions. The previous programme of Board Go See visits during the pandemic took place with the Chair and Chief Executive from spring last year at the start of the pandemic, and with the full Board for Executive and NED visits, observed by Governors, during summer and autumn/winter last year.
- **Executive Director level visits** to services regularly take place to support quality improvement, celebrate achievements, respond to briefings from the Freedom to Speak Up Guardian and problem solve with colleagues, including 'Back to the Floor' days on shift by the Chief Executive from this month and regular visits by our Chief Operating Officer and Director of Nursing & Professions to our inpatient mental health services throughout the pandemic.

- The Chief Executive, Director of Nursing & Professions and I as Trust Chair have **regularly engaged on site since January this year as respectively appropriate with the CVC site teams to support them with the changing demands of CVC site delivery and the Covid-19 vaccination programme**, escalating items as appropriate via the Trust's Gold and Silver Command structure for the pandemic.
- **Board members continue to engage openly with staff via established virtual forums**, as they have done so since the start of the pandemic in spring last year. Board members attend virtual staff forums such as the Aspiring Cultures Network monthly meetings for staff from minority groups, the Rainbow Alliance forum meetings, forum meetings for staff with disabilities and long-term conditions, and the two-monthly Strategic Equality, Diversity and Inclusion (EDI), Accountability and Governance Group to gain insights on morale, EDI issues to be resolved and to support the implementation of the Trust's Belonging and Inclusion plans into 2021/22.
- **Board members continue to present at or observe the live weekly Executive Broadcasts with a live Q&A afterwards with hundreds of staff. The live weekly broadcasts have been held since April last year on a variety of topics such as: the Trust's response to the pandemic, infection prevention and the Transition Week for reset & recovery in June; a schedule of activities such as appraisal planning in April/May and profiling the Network for staff with disabilities; and for celebrations such as International Women's Day in March and the NHS' 73<sup>rd</sup> Birthday this month.**

### **Recent Trust Chair Service Visits**

I have attended the following service visits as Trust Chair recently:

- In-person and socially-distanced visits to the Jacob's Well and Bradford Old College CVCs on 20 May, meeting our Trust and NHS seconded staff and volunteers to discuss the work of our registered Covid-19 vaccination service;
- In-person and socially-distanced visits to the Trust's Assessment Treatment Unit and Dementia Assessment Unit with the Medical Director at our Lynfield Mount site on 27 May;
- In-person and socially-distanced visit to the Community Mental Health Team (CMHT) at Somerset House with the Director of Nursing & Professions on 27 May;
- Virtual visit to the Palliative Care Team with the Director of Finance, Contracting & Estates on 28 June.

The results of the visits are reported to the Executive Management Team and back to the services to support service delivery and quality improvement.

### **Board Appraisals**

**Annual appraisals for all Board members have taken place**, starting with the Chief Executive's on 14 April with a follow-up on 10 May and my appraisal as Trust Chair on 6 May this year. Not only have the appraisals reviewed performance during 2020/21, they also agreed with Board members their objectives for 2021/22, ensuring leadership capacity and capability to deliver high-quality and sustainable care. These objectives also align to the newly introduced annual objectives which all

of the workforce will align with for 2021/22 as agreed at our April Board meeting and outlined below, led by our Chief Executive.

A **360 feedback process was undertaken for all Board members**, including Governor feedback on NEDs and external feedback on me as Trust Chair from external stakeholders, following my introduction of this 360 process last year.

A full report on NED performance was presented to the **virtual Council of Governors Remuneration Committee on 21 June and to the virtual Council's Private meeting 1 July this year**, alongside the results of the Trust Chair appraisal process being presented to those meetings by NED Carole Panteli as the Trust's Senior Independent Director (SID). Governors noted the robust process which had taken place and supported the Chair and NED 2021/22 objectives set out.

The **Board's Remuneration Committee met virtually on 29 June** to review the performance and 2021/22 objectives of the Chief Executive and Executives on the Board. The Committee thanks all Executives and our Chief Executive for their hard work and commitment during the last 12 months, especially due to the challenges of the pandemic, noting at the Committee that all Executives had performed beyond their 2020/21 objectives. The Committee also supported the proposed 2021/22 objectives set out for Executives.

This performance review and objective setting for Board members achieves:

- a review and assurance process to ensure that there is the leadership capacity and capability to deliver high quality, sustainable care at Board level; and
- outlining clear responsibilities, roles and systems of accountability to support good governance and management within the Trust during 2021/22 at Board level.

As mentioned, the Trust has set six key strategic objectives for 2021/22 for staff and Board members to align with which are as follows:

1. Engage with our patients and service users, ensuring they are equal partners in care delivery
2. Prioritise our people, ensuring they have the right skills, suitable workspaces and feel valued and motivated
3. Provide our people with the tools and coaching to support innovation, quality improvement and organisational learning through the Care Trust Way
4. Empower all staff to be leaders within an open culture in line with our values and aspirations for inclusivity and diversity
5. Value partnership ensuring that we collaborate to deliver maximum impact on health inequalities
6. Make effective use of resources so that our services are clinically, financially and environmentally sustainable

## **Council of Governors**

### **Governor Induction**

I hosted a virtual induction session on 24 May for all 10 new Governors joining the Trust from early May. The session included presentations on Foundation Trust Governance and the Trust's services and partnership working from the Lead Governor, Trust Board Secretary and me as Trust Chair. Retiring Governors also joined the session to share their past experiences for learning and development. Training and development opportunities are regularly offered to all Governors, including new ones.

### **Governor Appointments**

At the Council's meeting on 1 July this year, Governors were invited to consider the following opportunities due to recent or forthcoming Governor retirements:

- The roles of Lead and Deputy Lead Governors via an expression of interest process by 30 July and internal election process before our Annual Members Meeting on 16 September this year;
- Membership of the following Council Committees: Membership, Nominations and Remuneration.

The Trust's Lead Governor, Nicky Green, will step down as Lead Governor in the autumn this year, though will complete her final term of service by April next year. As the Board know, the Trust's Deputy Lead Governor, Colin Perry, retired in April this year. The Governor roles will be confirmed at the Trust's Annual Members' Meeting – please see below. I am grateful to both Nicky and Colin for their support, scrutiny of and involvement with the Trust over many years.

### **Open House Session: Governor Briefing on Well-Led**

Governor Open House virtual sessions have taken place every 6 – 8 weeks since April last year due to the pandemic, offering an opportunity for Governors representing communities and partners to be briefed by Board members on live issues and future plans, followed by an open Q&A. The sessions are facilitated by me to improve Governor understanding of the Trust's work and for them to raise issues on behalf of their constituents and partner organisations. The last sessions were on 22 April on the Trust's response to the pandemic and on 10 May on Well-Led – see below. This engagement has strengthened our Foundation Trust governance during the pandemic by continuing to involve people who use services, members of the public and external partners in our work.

A group of interested Governors met virtually on 10 June with some Board members to discuss the Trust's compliance and journey to fully meeting the CQC's Well-Led framework. Governors were briefed by the Deputy Director of Patient Safety, Compliance and Risk on the Trust's continued Well-Led work and current evidence against the framework's Key Lines of Enquiry. Thanks to all those who joined the session.

**Annual Members' Meeting – Save the Date!**

The Trust's Annual Members' Meeting (AMM) will take place on Thursday 16 September 2021, 1pm-4pm. We have secured a keynote speaker for the event, Ben Pearson, a Bradford-based mental health advocate and former police officer featured on Channel 5's Police Interceptors programme. Plans are underway to host a face-to-face event at Bradford City Football Club involving a 'market stall' format with a variety of Trust services hosting stalls which service users, carers and the general public can visit to discuss services that are offered locally. This has been very successful in previous years, though it will be dependent on any Covid-19 restrictions in place and a judgement will be made near the time. If social distancing prevents such a large gathering, we will arrange for the AMM to be held online using MS Teams as we did for our AMM in 2020. The AMM is the opportunity for Governors to receive the Trust's Annual Report and Accounts for 2020/21, meet Foundation Trust members and ask questions Board members about the Trust's work. A small team of staff has been established to plan the AMM and Governors have been invited to join to support plans.

**Cathy Elliott**  
**Council of Governors and Trust Chair**  
**July 2021**

## APPENDIX ONE

### Latest Board Go See Visits Programme

Month	Service	Virtual or face to face
Apr-21	Learning Disability Trauma Informed Care team	Virtual
May-21	DAU	Face to face
May-21	ATU	Face to face
May-21	CMHT, Somerset House	Face to face
May-21	CAMHS Crisis Team	Virtual
May-21	Vaccination & Immunisations - Bradford College	Face to face
May-21	Vaccination & Immunisations - Bradford College	Face to face
May-21	Acute Wards - Airedale - Heather Ward	Face to face
Jun-21	Community Vaccination Centre	Face to face
Jun-21	Community Vaccination Centre	Ad Hoc
Jun-21	Adult Physical Health Services - COVID-19 Daily Report-Out meeting	Virtual
Jun-21	Dental - Shipley Dental Practice	Face to face
Jun-21	CAMHS Early Intervention Psychosis Team	Virtual
Jun-21	Palliative Care Team Huddle	Virtual
Jun-21	Vaccination & Immunisations	TBA
01-Jun	CAMHS whole team	TBA
Jun-21	OPMH Physical Health Team Quops	TBA
Jul-21	CAMHS Neurodevelopmental Team	Virtual
Jul-21	Waddiloves MDT visit	Virtual
21-Jul	Acute Wards - Airedale - Heather Ward	Face to face
Jul-21	School Nursing Special Needs	TBA
Jul-21	OPMH Craven	TBA
Aug-21	ATU - IST Dashboard Meeting	Virtual
Aug-21	Bracken Ward	Virtual
Aug-21	Acute Wards - Lynnfield Mount	Face to face
Sep-21	CAMHS Psychological Therapies Team	Virtual
Nov-21	OPMH AW Team	Virtual

***Please note that the above Go See visits are part of a working programme and are subject to change.***