

**Annual Members' Meeting**  
**Wednesday 28 September 2022**  
**Meeting held virtually on Microsoft Teams**

<b>Present:</b>	Dr Linda Patterson OBE	Chair of the Trust
	Susan Francis	Staff Governor: Non-clinical
	Roberto Giedrojt	Staff Governor: Non-clinical
	Anne Graham	Public Governor: Bradford West
	Linzi Maybin	Staff Governor: Clinical (Deputy Lead Governor)
	Trevor Ramsay	Public Governor: Bradford West
	Pamela Shaw	Staff Governor: Clinical
	Joanne Squires	Staff Governor: Clinical
<b>In Attendance:</b>	Therese Patten	Chief Executive
	Bob Champion	Chief People Officer
	Shane Embleton	Deputy Director of Estates & Facilities
	Gilbert George	Interim Director of Corporate Affairs
	Phillipa Hubbard	Director of Nursing, Professions and Care Standards
	Badar Abbas	Manager, KPMG
	Simon Lewis	Non-Executive Director and Senior Independent Director
	Tafadzwa Mugwagwa	Interim Chief Operating Officer
	Carole Panteli	Non-Executive Director
	Mark Rawcliffe	Non-Executive Director
	Helen Robinson	Deputy Trust Board Secretary and Corporate Governance Manager (Committee Secretariat)
	Tim Rycroft	Chief Information Officer
	Dr David Sims	Medical Director
	Mike Woodhead	Director of Finance, Contracting and Estates

118 Members of the Trust and members of the public.

## Minutes

Item	Discussion
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**103 Welcome** (agenda item 1)

The Chair of the Trust opened the virtual meeting at 10:00am and welcomed the public, members, governors, Trust colleagues and Board members. Dr Patterson encouraged attendees to submit questions during the session through the use of the Microsoft Teams Question and Answer (Q&A) function and informed attendees that these would be answered in the virtual Q&A session following the presentations, along with those questions that had been submitted in advance.

Dr Patterson thanked all staff, volunteers and everyone who had been involved with the delivery of the Trust's work over the last 12 months, for their tenacity, passion and determination to deliver services and ensure safe care for patients, service users, carers and local residents under challenging circumstances. She went on to thank Board colleagues and the Council of Governors who had worked closely together to ensure that the organisation was fit for purpose and the best it could be.

**104 Apologies for Absence** (agenda item 2)

Apologies for absence had been received from Anne Scarborough, Lead Governor; Tina Butler, Appointed Governor: Bradford Assembly; Maz Ahmed, Non-Executive Director; Alyson McGregor, Non-Executive Director; Andrew Chang, Non-Executive Director.

The Annual Members' Meeting was quorate.

**105 Declarations of Interest** (agenda item 3)

There were no declared conflicts of interest in respect of any agenda items.

**106 Minutes and Matters Arising from the Meeting Held on 16 September 2021** (agenda items 4 and 5)

The minutes from the Annual Members Meeting held on 29 September 2021 were agreed as a true and accurate record. It was noted that there were no matters arising from the previous meeting.

**107 Presentation from the Chief Executive: Annual Report – “Looking back, with an eye on the future”** (agenda item 6)

Ms Patten delivered a brief presentation, which reflected on 2021/22 and also looked to the year ahead. She referred to the continued response to COVID-19 and in particular praised the Infection Prevention and Control Team for their work keeping the workforce and the Trust's service users safe. Ms Patten also recognised the pressures which had been experienced by staff in mental health and community services, which had often been overlooked in favour of the acute hospital response.

Ms Patten referred to the two community vaccination centres that had delivered more than a million doses of vaccines and thanked everyone involved in making this happen.

Some time was then spent reflecting on the Trust's staff, the health and wellbeing support that had been available during the pandemic, and the excellent work of the Trust's Better Lives charity.

Ms Patten stated that the Trust played an important role in connecting communities, and this work would continue to be developed in the future.

Ms Patten summarised the reset and recovery work, including the Next Steps programme, which had looked at the Trust's people, wellbeing and ways of working, the environment, health inequalities and inclusion, digital, and sustainability and best value. She acknowledged that new ways of working were not always inclusive and thanked clinical staff for providing services using digital technology whilst enabling service users to make the choices which were best for them and their care.

Ms Patten referred to the various partners of the Trust and the changes which had occurred during 2021/22 as a result of the Health and Care Act. There was now a duty to collaborate with partners at System (West Yorkshire and Harrogate) and Place (Bradford District and Craven) level. She also highlighted the priorities of the Act As One partnership in Bradford, which aimed to deliver key transformation work for the benefit of the population.

Looking to the future, Ms Patten anticipated further challenges including the continuation of COVID-19, a potentially high impact of seasonal flu, financial challenges for the NHS and close partners, and the cost of living crisis. However Ms Patten felt optimistic about the future, due to the impact of working together with partners. A refresh and review of the Better Lives Strategy would have ambitions regarding going from strength to strength as a community connector and move the organisation forwards.

Ms Patten closed by thanking staff, involvement partners, Governors and everyone who had supported the organisation over the last year.

## **108 Presentation from the Director of Finance, Contracting and Estates (agenda item 7)**

The Director of Finance, Contracting and Estates presented a report on the Trust's financial position that outlined the key performance metrics and a forward look at the key challenges and opportunities that the Trust would be facing in the next financial year.

He stated that in response to the pandemic, temporary financial arrangements had continued for the whole NHS during 2021/22. The Trust had a break-even plan and ended up with a surplus of £1.365m before impairments, which was a deficit of £1.991m after impairments.

Around £6m of capital expenditure had been invested in a major refurbishment of the Assessment and Treatment Unit (£1.8m); further roll out of anti-ligature alarmed doors in the inpatient estate (1.2m); implementation of the electronic Prescribing system for Mental Health inpatient services (£0.4m); and routine replacement of equipment, upgrading of systems and maintenance of the Trusts estate.

Mr Woodhead highlighted challenges which had impacted on the financial situation, but overall the Trust had performed better than the plan.

Mr Woodhead outlined how the £199.6m expenditure had been broken down, with the majority of costs being around staffing. He went on to break down the £197.6m income, the majority of which had come from contracts with Clinical Commissioning Groups.

Looking ahead, Mr Woodhead stated that the Trust had approved a break-even plan for 2022/23, however there remained a significant level of uncertainty and risk in the plans due

to the ongoing impact of COVID-19, the evolution of Integrated Care Boards and Systems, and the impact of the cost of living crisis. Robust risk management arrangements were in place, alongside a strategic programme to deliver the £14.4m efficiency target. A capital programme of £4.9m had been approved for 2022/23.

Mr Woodhead ended by stating that the Trust had a strong history of effective financial management and he was confident that financial risks would be managed, and statutory duties met within the plans set for 2022/23.

**109 Presentation from the Trust’s External Auditor** (agenda item 8)

Mr Abbas, Manager at KPMG LLP, provided a presentation on the findings from the Trust’s 2021/22 Annual Report and Accounts. Firstly, he outlined the scope of the work and outlined responsibilities as an independent provider of the external audit services, including the audit of the financial statements.

Mr Abbas stated that the audit found the Annual Accounts for 2021/22 to be a true and fair view of the state of the Trust’s affairs with the accounts being prepared in accordance with the Department of Health and Social Care Group Accounting Manual. Mr Abbas added that that the auditors had found that the Trust had suitable arrangements in place to ensure that appropriately informed decisions were made with resources deployed to achieve planned and sustainable outcomes. He stated that findings from the financial statement audit had resulted in an unqualified (satisfactory) opinion and shared that the Trust’s annual governance statement reflected the Trust’s control environment and risk management arrangements.

Next, Mr Abbas presented information about the value for money findings, which assessed whether there were any significant weaknesses in the Trust’s arrangements for achieving value for money. He stated that no significant weaknesses had been identified.

In relation to the whole of government accounts, Mr Abbas confirmed that the Trust’s submission to NHS Improvement for the production of the consolidated NHS provider sector accounts matched the financial statements.

Finally, Mr Abbas confirmed that there had been no inconsistencies identified in relation to the Trust’s Annual Report.

**110 Presentation from the Director of Nursing, Professions and Care Standards, and Deputy Chief Executive: Quality Accounts / Quality Highlights** (agenda item 9)

The Director of Nursing, Professions and Care Standards presented the Quality Report, outlining the statutory requirements and explaining the purpose of the report as being:

- To represent a true and fair reflection of the quality of services provided
- Provide the views of the report from key external stakeholders.

Mrs Hubbard explained the improvement of the Trust ratings from the Care Quality Commission (CQC) to an overall rating of “Good”, but recognised that there were still areas requiring improvement.

The report further outlined:

- Clinical audit and research and innovation;
- Quality performance;
- Involvement – service users, communities, engagement;
- Volunteering and the Better Lives Charity – to enhance services;
- Giving staff a voice to create an open culture;
- Feedback from key stakeholders.

**111 Presentation from Chief People Officer: Our People** (agenda item 10)

The Chief People Officer noted that the Annual Report and Accounts provided a wealth of workforce-related data. For the purposes of the Annual Members Meeting, Mr Champion explained he would focus on the Trust’s delivery against the NHS’s People Plan and the four key delivery areas / pillars of:

- Looking after our people;
- Leadership, inclusion and belonging in the NHS;
- Growing our workforce for the future;
- New ways of working and delivering care.

Mr Champion explained how the Trust aimed to achieve each key area and the programmes of work that had been put in place in order to achieve those aims.

**112 Presentation from the Deputy Lead Governor: Lead Governor’s Report** (agenda item 11)

The Deputy Lead Governor started by explaining the topics that would be covered in the presentation:

- Current membership;
- In year achievements;
- Focus into the future.

She drew attention to how being in the role of governor was felt to be a privilege. The membership demographics were reported and it was explained that there was a drive within the Council of Governors to increase youth membership as they were the workforce, leaders and innovators of the future.

The role of the governor, how they represented the community and ways they got involved was described as well as how the place-based approach would enable governors to focus on the bigger picture and how the future might look. However, she noted that whilst the CQC rating had improved to “Good”, there should be no complacency and that improvements were still needed.

The three areas that had been the Governors’ biggest focus in the past year were noted as:

- The Integrated Care System – the place-based approach;
- Covid-19 – staffing;
- Youth membership.

The different categories and constituencies of governors were confirmed and their role of challenging the Board of Directors and holding the Non-Executive Directors to account for the performance of the Board was explained. They were able to do this as they listen to issues in their local communities, service users and staff in order to find solutions.

**113 Presentation by Deputy Director of Estates and Facilities: Our Future – Smarter Spaces Strategy** (agenda item 12.1)

The Deputy Director of Estates and Facilities introduced the Smarter Spaces Strategy which was aimed at creating a good quality estate around the Trust's services with facilities that were fit-for-purpose and in the right locations. It was explained that this had begun with the commissioning of an external report which reviewed the estate and proposed opportunities to achieve the ambition of creating the best places to work and deliver high quality services.

The intention of using the hub and spoke model and what that entailed was explained, noting the intention to have five main hubs across the district with up to 30 spokes around them. This would focus on reducing the estate but at the same time would provide higher quality accommodation suitable for modern healthcare needs.

The differences between hubs and spokes were outlined, noting that the hubs would also have the ability to be shared with the Trust's external partners where appropriate. The methodology was explained, noting it was a five-year plan which would continue to evolve with continuous engagement required to align with digital and workforce transformation work. Maintaining quality service delivery during the transformation was seen as key and this would be continuously tracked.

Achievements to date were highlighted and it was noted that future plans needed to work alongside other strategic programmes to achieve the clinical transformation projects. Adapting to situations and issues as they arose would be achieved by continuous engagement and consulting, especially with the Local Authority in the Neighbourhood Asset Review aimed at bringing health and social care opportunities together.

**114 Presentation by the Chief Information Officer: Our Digital Future** (agenda item 12.2)

The Chief Information Officer outlined the current digital situation and anticipated future digital direction to support the organisation, staff and be able to deliver quality services. He drew attention to the publication of the Trust's digital strategy at the end of 2021, noting the ability for the strategy to adapt and be flexible as needs required. He noted that the digital solutions were focused on the people who use the Trust's services:

- Service users – to ensure their safe and secure access to services
- Staff – to provide access to the training and technologies to assist with their roles.

Threats to cyber security were acknowledged along with the Trust's ability to respond appropriately.

The digital strategic themes were explained along with the associated aims and ambitions to becoming a digital leader and what that would mean for each digital pillar.

Further explanation of the five year plan for the digital strategy was provided with expectations to 2026.

## 115 **Virtual Question and Answer Session** (agenda item 10)

The Chief Executive thanked the presenters for summarising some of the vast amount of work that had been achieved in the last year. She then opened the meeting up to receive questions from members of the public and stakeholders for the Trust's Board of Directors, noting that some questions had been received in advance and others had been submitted using the virtual chat facility on Microsoft Teams.

The following question had been received in advance for the Board of Directors:

Question 1: Keith Double, Trust member, asked "Given that service users' and carers' input to the recruitment process at Bands 7 and above is considered to be a high priority and appropriate training given, how is the training for staff on interview panels organised? What, if any, are the differences between the training? Why are service users and carers not involved at lower bands?"

Answer: Mr Champion, Chief People Officer advised that the involvement of service users in the recruitment and selection process was a very valuable component. Before the pandemic, face-to-face training was delivered for service users and line managers. However this was suspended in response to COVID-19 although line managers were still able to access the training. Service User training was along the same lines as that provided to line managers. He further advised that details of the components of the training packages and associated presentation decks could be provided if requested. From October 2022, a working group would be looking into how service user representatives could be facilitated on panels for all patient facing roles of band 5 and above, as well as how to make the training available to service users in a safe manner in order to give them more confidence and be able to contribute effectively.

The remaining questions had been raised during the meeting noting that some had already been answered in the virtual chat facility

Question 2: Trevor Ramsay, Public Governor asked "Why is an incorrect number for First Response still being given out, including on the MIND Bradford's answerphone message."

Answer: The Chief Executive stated that the Trust used a national freephone number for all First Response services throughout the country. The telephone number being given out would be investigated and rectified as appropriate.

**Action: Chief Executive.**

Question 3: Jo Squires, Staff Governor asked "Do staff have the opportunity to do an exit interview with HR? Some people might not feel able to provide an accurate reason for leaving to their direct manager or team members."

Answer: The Chief People Officer stated that the procedure started with the employee completing a confidential online exit questionnaire in their Electronic Staff Record portal. They were then offered a meeting for a leaver conversation with HR and/or their line manager, whoever they felt more comfortable talking to. Wherever concerns about the employment

relationship were raised during that process, colleagues were signposted to other procedures, such as grievance, dignity at work, or freedom to speak up.

Question 4: An anonymous attendee asked “What there was for young people already working for the Trust?”

Answer: The Chief People Officer stated that the Trust had a variety of apprenticeship programmes available at all levels, so was able to support personal and professional development into professional career pathways, or simply to help young people be the best they could be. Apart from career support and advice, the Trust could provide a wide range of resources to support personal development and lifestyle choices. The Chief Executive shared her enthusiasm for apprenticeships and stated that they were already used successfully within the Trust, but the Trust was looking for more ways to use them and the Human Resources department were aware of this ambition.

Question 5: Mike Frazer, Public Governor stated that “the Trust was doing great work in funding and organising health and well-being activities e.g. walking and singing groups, but asked if more could be done?”

Answer: The Director of Nursing, Professions and Care Standards stated that the Trust had a comprehensive programme in place but planned to improve this further as part of the Better Lives Charity work.

Question 6: An anonymous attendee asked “When are we going to get better staff areas to relax when on breaks etc, in all areas?”

Answer: The Director of Finance, Contracting and Estates stated that there was a recognition that there were areas for improvement in this regard, and the Trust would try to meet these needs in the design of its future estate through the Smarter Spaces programme. It was recognised that it was more difficult to rectify in some areas such as Lynfield Mount and consideration was being given to how to manage this area if the Trust was not successful in gaining national funding.

Question 7: Mike Frazer, Public Governor stated that “There are some key players such as NHS living well and charities like the Cellar Trust fishing in the same waters and could we have an executive at operational level with specific responsibilities to work with partners to coordinate and expand well-being activities?”

Answer: The Deputy Director of Estates & Facilities stated that the Trust was actively engaging with the Cellar Trust with their ambitions for a health and wellbeing hub, along with other external partners. The Chief Executive added that The Bradford Partnership (made up of the Chief Executives of the NHS Trusts along with a GP, voluntary sector and care home representatives,) considered the changes in legislation, and working with voluntary sector partners was fundamental to this. The Chief Executive noted that it was everyone’s responsibility and the work done in the partnership focused on health inequalities and population health. The previous Chief Operating Officer used to have a specific responsibility around this area. This would be reviewed with fellow executives to see if any further work was required.

**Action: Executive Management Team.**

Question 8: An anonymous attendee stated “Sports Teams and clubs might be a good shout for the Trust and across the ICS, similar to university society models”.

Answer: The Chief People Officer stated that sporting and other physical activities were very much in consideration within the Trust’s health and well-being and healthy living agenda. How that progressed would depend to a large extent on infection prevention and control obligations, but that he would advocate for sports teams and clubs when safe for to do so.

Question 9: An anonymous attendee stated “It would be good to know more about the Trust plans to integrate workers together with our partners for co-location, for example, health with social care”.

Answer: The Director of Finance, Contracting and Estates replied that this was a key part of the Smarter Spaces programme. The Neighbourhood Asset Review included all Health, Council, Emergency and VCFS partners with a view to establishing which services to co-locate and how to do it. It was about more than just co-locating but about how to better work together to deliver effective services to the population.

Question 10: An anonymous attendee asked “When will we get access to large meeting rooms for team away days, group meetings and learning rather than paying for external facilities? A second related question was included, “When can we move away from all the mask wearing etc it had a place but think we need to mirror what’s going on outside of the NHS now and free up rooms etc for normal usage”.

Answer: The Director of Finance, Contracting and Estates replied that this was largely driven by Infection Prevention Control measures. Until it was deemed safe to work in close proximity without masks etc, the Trust would continue to need to book larger external spaces for some large events. The Chief Executive noted that the booking of spaces in New Mill seemed to be progressing well, including meeting rooms. The Director of Nursing, Professions and Care Standards responded regarding status of infection prevention and control noting the rising rates which was leading to caution in order to protect both service users and staff and their families. Whilst there were some larger bookable rooms, masks still needed to be worn. Some of the larger rooms on the estate were reserved for training functions. Assurances were given that the Trust would continue to review the guidance available.

Question 11: An anonymous attendee stated “It would be great to have a dedicated education space in the Lynfield Mount Hospital estate, to be considered as a gold quality education and training provider for all clinical and non-clinical groups”.

Answer: The Deputy Director of Estates & Facilities stated that this had been recognised and was part of the Lynfield Mount redevelopment plans, subject to funding being granted.

No further questions were raised.

**116 Any Other Business** (agenda item 12)

No other business was raised. At the conclusion of formal business, the Chair closed the Annual Members’ Meeting and thanked everyone for attending, noting the documents could be downloaded, a recording of the meeting could be watched and the Trust was always open to further questions.

The Chair commented on how the future was exciting and she looked forward to having the opportunity to build on the work of the last year with the team, Governors and service users.