

## Notes from Governor's 5 Year Strategy Planning Workshop Friday 14<sup>th</sup> October 2016

### Present:

Name	Title	Name	Title
Adam Butcher	Service User Governor	Debjani Chatterjee MBE	Service User Governor
Juliet Fidorra	Business Planning Partner	Elaine Hall	Staff Governor
David Houlston	Public Governor	Jules Jones	Public/Lead Governor
Dr Paul Miller	Staff Governor	Pat Molloy	Service User Governor
CLlr Josie Paszek	Appointed Governor	Jason Rowlands	Director of Strategy & Planning
Sam Stoddart	Deputy Board Secretary	Joan Toy	Service User Governor
Susan Wakefield	Appointed Governor		

### Apologies:

Name	Title	Name	Title
Teresa Barker	Appointed Governor	Angela Barney	Carer Governor
Barbara Bell	Public Governor	John Buston	Public Governor
Tyrone Colley	Service User Governor	Dan Creber	Staff Governor
Billie Critchlow	Carer Governor	Rosemary de Ville	Public Governor
Richard Fletcher	Service User Governor	Deborah Gamsu	Staff Governor
Sylvia Hartley	Public Governor	Diane Highfield	Staff Governor
Sue Highton	Appointed Governor	Gill Holt	Carer Governor
CLlr Adam Hurst	Appointed Governor	Dani Hydes	Staff Governor
Prof Paul Ince	Appointed Governor	Celia Jackson-Chambers	Appointed Governor
Kwahja Ziauddin Mohammed	Public Governor	Vin Lewin	Staff Governor
Toby Morgan	Service User Governor	Terry Proudfoot	Service User Governor
Lorraine Ricketts	Public Governor	Dr Abdul Rob	Appointed Governor
Sue Roe	Carer Governor	Dr Leigh Sorsbie	Appointed Governor
Janet Sullivan	Appointed Governor	Michael Thomas	Young SU/C Governor

### 1. Welcome and Introductions

Jason Rowlands, Director for Strategy and Planning welcomed all to the meeting and introduced his colleague Juliet Fiddora who would be helping to facilitate the session.

Jason then went out to explain that the purpose of the session was to obtain a clear view from governors about issues that the organisation needs to think about as it considers its strategy going forward. He explained that the Board initiated a full review of its strategic direction earlier in the year. Since then Jason and his team have been talking to different groups of people including staff, service directors and service users. In addition, staff have been asked to complete an online survey regarding strategic direction. The feedback from all the groups will be taken to the Board who will meet later in October. The strategic direction will be finalised and then presented to the Board in January 2017.

Each year the Trust must produce an annual plan which details the Trust's business and quality objectives (based on its strategy). This year a draft of the plan needs to be in place by November with the final plan sent to the Trust's regulators in December. This is significantly earlier than in previous years. Jason explained that the Trust usually works with governors in identifying objectives for the annual plan but because of the extremely tight timescales, it is not yet known how this will be done. He added that discussions with the Council of Governors about the draft annual plan at its November meeting may allow for feedback before final plans are submitted to the regulator.

## **2. Workshop Session 1**

Governors were invited to view and discuss the display boards which contained summarised feedback from a number of stakeholders including members, staff and external stakeholders. Each group was asked the questions "what does excellent care look like?" External stakeholders have provided views on what they felt needed to be different in the future within the Trust from their perspective. In addition, each group was asked for feedback on the current strategy and what the new strategy should look like.

The Operational Director's Group within the Trust explored collaborative/partnership working and opportunities and needs to develop services both at a neighbourhood and city wide level.

Governors were then asked in groups for five key messages/thoughts about the displays. They were as follows:

- Enhanced support for carers - if a whole-community approach was taken this would alleviate hospital admissions. Different support systems are needed in the city
- Funding – what happened to the increased funding for mental health promised by the government?
- Staff training – the right training needs to be in place for the right staff
- Ambition – world class? Perhaps outstanding quality of care is a more achievable but it's good to aim high
- Contractors should be included in the development of the strategy
- The right communication tools must be used which are accessible and easy to read/use.
- Closer and mutually beneficial partnership with Sheffield's voluntary sector
- Genuine consultation with and respect for service users and carers
- Early and careful assessment
- More efficient and joined-up computer/IT systems. IT needs to be sorted.
- Excellent values which need to be embedded and underpin everything the Trust does
- Overwhelming influence of fiancés and the impact this has on services, especially CMHTs

## **3. Workshop Session 2**

Jason then asked governors to consider the significant challenges facing health and social care over the coming years. He explained the changes that are likely in South Yorkshire in the context of the five year forward view, of which the key message was that no one part of the health system could sort out all the issues within the system and that there needed to be a new, collective approach. This led to STPs (Sustainability and Transformation Plans). STPs are looking at health and social care systems by locality. Sheffield is part of the South Yorkshire and Bassetlaw STP. STPs are about trying to do things differently and they should generate positive change by making the whole system work together.

But what does the STP mean for Sheffield? At the moment the primary focus has been on acute care. Within the STP priorities more relevant to the Trust's clients development needs related to reducing out of town hospital care and changes is in the reliance on hospital for care for people with a learning disability. Each town/city within an STP will also have its own plan. This will generate a clear focus for

neighbourhood models of care and how agencies are working together for the benefit of the community.

So, in summary, the main change for this Trust arising from the STP and Sheffield Plan developments are a need to embrace health promotion in all areas, closer working with primary care and delivery of effective models for mental health and learning disability services.

As part of the STP c£235m needs to be saved in Sheffield over the next five years. These developments will shape how we look and review what we are currently providing and what new ways of delivering services we move to. Jason gave some examples of the areas that will be considered:

- Social Care – the Trust does provide some social care but will likely be providing less in the future as others are able to provide this, and in some cases may be better placed to provide this? We will need to consider social care provision in the Trust’s future.
- Quality – have we got the right arrangements in place to ensure we can deliver recovery, collaboration, and NICE guidance – are all these embedded?
- Health promotion – how do we ensure this is fully embedded?
- Social inclusion agenda – are we working effectively, in the trust and with others to provide best opportunities for people in this area (eg employment)?

Governors were then asked for their thoughts on the key challenges facing health and social care. They were as follows:

- Access to services should be clear and quick
- Services should be consistent
- Will health promotion alleviate financial challenges?
- How can we demonstrate that health promotion has a positive effect on services?
- Why do we allow the most ill to be treated away from their communities?
- Finance challenges
- Staff morale
- Government induced expectations
- Services need to be responsive and flexible to reflect needs and population changes

#### **4. Looking Forward**

Governors were asked to identify what excellent care would look like. Comments included:

- What someone needs when they need it
- Ongoing feedback to evaluate how services are being received
- Effective use of time and resources
- Choice – does it exist and if so how do service users get to know about their choices?
- Making sure people get the right treatment provided by the right person at the right time
- Thinking ahead about the future service users and carers and what their needs will be
- Making sure the Trust is aware of and utilising new developments in IT
- Meaningful and person-centred inclusion.

Governors were then asked to identify barriers (B) and enablers (E) for excellent care.

- Signposting (E)
- Training and support (E)
- Provision of options for service users (E)
- Locality-based services (E)
- Cost (B)

- Ongoing feedback (E)
- Step-up model of care can be a barrier to getting the right level of care (B)

## **5. Summary and Close**

Jason thanked everyone for their valuable contributions. A brief evaluation of the session took place which was very positive. The session was brought to a close.