

BIRMINGHAM AND SOLIHULL MENTAL HEALTH NHS FOUNDATION TRUST
COUNCIL OF GOVERNORS TO BE HELD ON THURSDAY 14 MAY 2015

Membership engagement – proposals to form a working group

Purpose of report - To update the Council of Governors on plans around development of a membership engagement and governor involvement strategy

Actions required – The Council is asked to approve the formation of a small working group to support the development of the strategy

Summary

Discussion took place at the March Council of Governors meeting about the process to develop a refreshed membership and governor involvement strategy.

Since then a workshop was held, led by the Company Secretary, to look at the key elements a strategy should cover and to gather in views on what was required moving forward. Five governors were in attendance.

Following the workshop a survey monkey posing key questions around to elicit further input from governors was circulated. Four governors responded.

It is important to ensure that the strategy is developed with sufficient input from governors and is 'owned' by the Council, and there is commitment from the Council on the strategy going forward, therefore it has been agreed with the Chair and the Lead Governor that the survey monkey would be issued in hard copy for governors to complete in the break and that a proposal be put forward to the Council for a small working group to be created to support the Company Secretary to develop the refreshed strategy, with a view to bringing a revised strategy to the Council of Governors in July 2015.

The strategy needs to reflect the role of Governors and how we will take forward their specific role in engaging with the membership. It should clear aims, objectives, priorities, challenges and plans and should include a clear engagement and reporting cycle as well as clearly articulating the interface between it and other public involvement, voluntary, charitable funds and community engagement strategies in place.

There were also some key areas where the Board identified areas in which there was a need to improve evidence of compliance with the Code of Governance which need to be reflected, around:

- Canvassing views from the membership, the public and for appointed governors the body they represent, on the forward plan, including its objectives, priorities and strategy and feeding those views into the Board of Directors
- Monitoring how representative the membership is and the level and effectiveness of member engagement for reporting into the Annual Report. This is done but more is required. The annual report to the Board on membership should include this information.
- Clarifying how the public interests of patients and the local community will be represented, including its approach for addressing the interface between governors and any local consultative forums which needs to be covered in the annual report to the

Board on membership

Supporting materials attached for information

- **Appendix 1** – summary output from the workshop
- **Appendix 2** - summary feedback from responses to the survey monkey
- **Appendix 3** – Slides from the engagement workshop

Board Director Sponsor: Sue Davis, Chair

Report Author: Deborah Lawrenson, Company Secretary

Previously Discussed: N/A

Appendix 1

Governors workshop 14/04/2015 on Membership Engagement and development of a refreshed strategy

Attendees Governors:

- Patrick Cullen
- Anthony Brookes
- Lucy Okill
- Rob Dalziel
- Peter Brown

Deborah Lawrenson – Company Secretary
 Caroline Burgin – Board Support Officer

Deborah Lawrenson provided a presentation which enabled discussion about the following key areas.

	Observations from those participating in the workshop
What is the Governors role in engagement?	<ul style="list-style-type: none"> • To communicate with constituencies – but how? • To be knowledgeable about what is going on in organisation and to be able to signpost • To be a bridge between Board, Senior Management and members • To challenging Board/ Holding to account • To represent your community – engaging with them, both formally and informally. • To bring in intelligence
Do governors understand their role in engaging with the membership?	<ul style="list-style-type: none"> • Governors not seen as a unified Council • Unsure how many Governors really understand the role • Addressing stigma- more powerful to tackle as a whole council • Play to strengths by Governors- some response events / some Governor surgeries • Represent all your constitutes, not just those who voted for you
What are Governors good at?	<ul style="list-style-type: none"> • Knowledgeable • Reducing Stigma • Approachable • But not seen as a collective, seen as individual Governors
What works now or is in place now?	<ul style="list-style-type: none"> • The Lead Governors is very well known • Some Governors good at recruiting members in their constituencies • Nursing celebration event (Governors attended given extra

	<p>credibility) and Quality Awards</p> <ul style="list-style-type: none"> • New Dawn – Governors invited/ attending and LiA events • Drop in session – 2014- advertised/ connect/ posters • Inbox account for non-clinical – advertised on connect – not very effective not used • Governors mailbox- advertised on website – used but not frequent.
<p>What can the Trust do to support Governors in their engagement with members?</p>	<ul style="list-style-type: none"> • Pack- what Governors do for you? • Trust Talk- meet the Governors article in Trust Talk • Governors contribute articles in Trust Talk • Opportunity to speak to NEDs outside Board to raise concerns? • NED matrix- what they are interested in, how do we put structure in place for Governors/ NED's to discuss • Sector on COG agenda (feedback) • Engagement with schools • Survey monkey • Providing Governors badges <p>Support with:</p> <ul style="list-style-type: none"> • How to meet service users to be able to communicate and address issues that can be raised? • How to sell myself do I need training to communicate to others, groups etc.? • 'Capturing or identifying' how my voice and the service users voice can be heard? • Use survey monkey to get more views on what is needed in the strategy
<p>What would help to improve how engagement works?</p>	<ul style="list-style-type: none"> • Being consistent in our messages • Providing a pack of information for governors to share with members • Governors could attend more external events and participate in groups <ul style="list-style-type: none"> • Refresh Trust Talk and ensure everyone gets it. • Share info/ photo's of the Council at all Trust sites • Have a slot at all inductions for a Governor to speak (in support of the Lead Governor) • Need to link activity to strategy to demonstrate outcome • Identify principle/objectives for the strategy and hang action plan/forward plan off those objectives <ul style="list-style-type: none"> • Share pictures of Governors with 'click to connect' on internal intranet and external website. • Use Survey monkey to ask for votes on specific issues • Competitions to recruit • Include membership form in induction pack for new staff for them to share with others • Provide leaflets with pictures of Governors and contact details to share with constituencies • Identify objectives for year ahead

	<ul style="list-style-type: none"> • Use a 'coffee morning/ sofa' engagement approach or something similar, with people at outside events (like 2gether NHSFT) • Do films to present patient stories at the Board • Using Governors and Board members more out and about to connect – using 'feet on the street' about specific issues • Hosting a membership conference • Inviting Governors/ members to different consultation events • Holding 'Meet the Governors' sessions • Understanding the skills of the Council (carrying out a skills audit) this will help identify what roles suit individual governors best and will help governors to know who to go to for advice and support • Share regular communication as a council to all members; outline on plans, when they meet governors, details on meetings, upcoming items on COG agendas • Need range of comms (not just electronic)- the front page of all communications needs to draw people in. • Need to get to a point where our Council is known and other organisations or individuals think ' I must invite them to my event'. • Need to link into Corporate Social Responsibility Programmes • Charities need to be given more opportunity to get involved • COG meetings- look at structure and ensure Governors give feedback; need more of a balance (too much in 'receive mode') needs to be more interactive • COG could hold an event inviting others to: External Stakeholders, Staff for example after the conclusion of KB inquest • Need ideas to draw people such as videos of what it is like to live with Mental Health issues • Use Case Studies – identify examples of where the Trust has used involvement to make improvements • Do a Post impact review on New Dawn (getting views in from the members)
<p>What should be the priorities in our strategy?</p>	<ul style="list-style-type: none"> • To better engage with members • To better engage with each other • To challenge and reduce stigma (Educate) •
<p>What improvements would we like to see in place by this time next year?</p>	<ul style="list-style-type: none"> • To be a proactive and decisive council • To have better connectivity planning • To be a Trust people think about - dynamic • To encourage more participation from members, particularly in areas where we have lower numbers standing for election onto the council. • To be seen as visible and a collective Council

Appendix 2

Survey Monkey results so far

Number of responses to survey: 4 (which are anonymous)

The 4 responses collated for each question as follows:

<p>Q1: What do you think the Governor role is in engaging with the members?</p>	<ol style="list-style-type: none"> 1. To be able to have a surgery or meeting place to listen, hear the voices of Service Users and representing. 2. To provide both structured and ad hoc opportunities for constituents' views to be canvassed and discussed - in order to inform the holding of the Board to account via non-executives. Then to provide broad feedback. To signpost constituents on to others if direct assistance is required 3. Getting the message out around the role of the Governor, the work of the Trust and obtaining the views or voice of the public on mental health matters to feed back into relevant discussions and decision making 4. Unsure - still early days of being a Governor, however I feel Governors should be supporting the wider worker of the trust in keeping the members updated and listening to members thoughts, feedback and/or concerns
<p>Q2: How involved have you been so far - what types of things have you participated in?</p>	<ol style="list-style-type: none"> 1. If it's about connecting with Service Users I'm unable to meet with SUs as there is nothing set up to enable me to connect. What I have done is be part of PLACE Visits, Mystery shopping, interview panels, Remuneration and nomination committee and many other things including representing Solihull Service Users at the Solihull Mental Health Re-design committee 2. None really 3. As a new Governor it is about finding my feet and exploring potential opportunities for involvement. Meanwhile, I am as a resident in south Birmingham gathering intelligence through my daily contacts and conversations with people etc. 4. I have only been a Governor since January and still feel like I'm finding my feet! Do not feel I have had much involvement in engaging members
<p>Q3: How do you feel engagement is going with the membership either generally or directly by Governors? What has worked well, what has worked less well and what should we be trying?</p>	<ol style="list-style-type: none"> 1. It is falling, nothing has worked well or nothing set up to show us if we have. 2. Think it is poor to be honest - limited, unimaginative and not joined up 3. I feel there is scope for the Board and Governors to work together to identify ways in which engagement with the membership might be usefully developed (through attendance at meetings and events, activities in communities, with stakeholder groups etc)

	<p>4. I do not feel it is going well. I was a member for a year before becoming a Governor and heard very little about the Trust. Whilst I cannot comment on what has worked well, or what hasn't worked well, I do feel things going on within the trust should be promoted to members much better, and there should be more opportunities for them to get involved. I also feel there should be more information in the members area of the website</p>
<p>Q4: What more support do you need to help you engage with the members?</p>	<ol style="list-style-type: none"> 1. Need someone to help me engage with Solihull Service Users. 2. A strategy would be good to coherently organise governors as a council 3. Administrative/secretariat support, help to collectively decide who might be best person(s) to take on particular work or tasks etc 4. I would be keen to find out more about the opportunities of how I could be engaging with members. At the moment I do not feel I know much about how I can be engaging with members, but am very keen, so would just want to know more about potential opportunities.
<p>Q5: What would a higher level of success in terms of engagement look like? What should we be striving for, what should be our top three engagement priorities for the next two years to help drive our strategy?</p>	<ol style="list-style-type: none"> 1. Some kind of surgery as politicians have or a meeting place, or a Solihull positive mental health group mixing carers Service Users and others to attend. Have consultation meetings for members, have presentations for members, have education network for members to find out more about what we deliver in our trust like HEFT do. 2. That governors will be featured prominently at all key Trust events (all not just one or two.) 2. Awareness raising campaign around what governors can do 3. Agree standard areas for which priorities will be determined each year (i.e. service users, carers, community, staff.) 3. Improved dialogue with a wide range of stakeholders, and those stakeholders having more influence over matters impacting on them through representation by Governors. 4. Respondent skipped question



Engagement – taking BSMHFT to the next level



Key duty of Governors

- Governors have a key duty *‘To represent the interests of members of the Trust and the interests of the public’*
- Good engagement will:
 - Help us to understand the needs of our communities
 - Help us to provide better care that meets those needs
 - People will feel better able to share their views
 - Help us to be more integrated at every level
- Governors are key ambassadors for our Trust and can be powerful catalysts for change through their engagement activity



Key discussions for today

- What is engagement and why do we do it?
- The practicalities (who, what, when and how)
- How engagement is going so far both with members and the public but also for you as individual governors
- What would a higher level of success look like?
Learning from others
- How could we get there and what support do you need?



Why we engage

We have a statutory obligation to engage and to do so well

- It helps us to put service changes and improvements in place to best meet the needs of our local populations
- It puts people at the heart of the NHS
- It provides an opportunity to listen and learn
- It provides a means to share information and to influence
- It will help us to increase membership
- It is a benefit for those who are members to have their views heard
- It should be meaningful and not be a box ticking exercise



What is engagement?

- Engagement can be
 - On specific issues of interest to our communities or to the Trust
 - Continuous to gain general feedback about services or patient experience
 - With stakeholders such as partner organisations
 - Through statutory consultations (usually Trust led)
- Engagement is a means of harnessing people who have expressed an interest in our Trust



What is the Governor role?

- In your groups discuss what you think the governor role is collectively and individually in engagement
- Feedback three key points from your discussion for us to discuss as a wider group



Governors are ...

- Listeners
- Informers
- Ambassadors/the human face of the Trust
- Agents of change
- People with access
- Champions
- Interested parties
- Neutral parties

Is anything missing following your discussions?



How Governors can get involved?

- Governors can
 - Help tackle the stigma of MH that exists in wider society
 - They can act as a voice for their constituents
 - Participate in PLACE visits
 - Participate in working groups and committees
 - Write articles or contribute to the editorial direction of 'Trust Talk'
 - Represent the Trust on information stands at events, talking to the public and helping to recruit members
 - Talk about the work of the Trust and their experiences as Governors at local community groups, other FTs, NHS Provider events etc
 - Support the Communications and Marketing team in reviewing and evaluating the Trust website
 - Attend and contribute to VIP visits
 - Support communications by acting as a media case study for the Trust
 - Take part in marketing campaigns to increase the number of Trust members
 - Fundraise (and encouraging others to do so) for the Trust charity 'Caring Minds'
 - Participate in recruitment panels and forums
 - Participate in volunteering activities in the Trust
- Governor involvement can actively contribute to the internal and external reputation of the Trust



Who with, when, where and how?

When we engage we need to consider:

- Our goals and strategy
- The profile of our membership
- Our target audience
- Governor resources and desires
- The wider health economy's goals
- Whether the engagement we're involved with is a statutory consultation, a recruitment drive or a specific or ongoing engagement exercise



When we engage we need to think about what we want to achieve?

- Improved service design and provision
- Improved patient/service user and carer/family experience
- Improved dialogue
- Effective targeting of resources saving time and money
- Greater clinical and staff engagement and satisfaction
- Improved outcomes and safety for service users and patients
- Improved knowledge, understanding and reassurance
- Demonstrable changes in practice or provision after the engagement
- Recruitment of new members and making membership meaningful



How?

- How do we do it here?
 - What have we tried, what worked and what didn't (look at highlights from our annual reports provided)
- Are there other ways we could consider
 - look at the slides of ideas from other FTs, would any of those work here?
- Is our membership engagement work connected enough with volunteering, community engagement and communications activities? Are we missing a trick?
- How involved have you been?
 - Capture the type of things you have all been involved in and what you would like to do more of in the future

Again talk about this in your groups and capture your thoughts –

- What three things/ideas would make the most difference to our engagement feed these back to the wider group



- Schools
- Sixth form
- Colleges of FE
- Universities

Service users
Families
Carers

- CCGs
- Councillors
- Healthwatch
- Health and wellbeing boards
- Local Authorities
- GPs

WHO?

- Local charities
- Sports clubs
- Faith groups

Local large employers

- Support groups
- Focus groups
- Community groups
- WI
- Rotary clubs
- Resident associations



Some suggestions for how...

- GP surgeries
- Health watch meetings
- Resident association meetings
- Wi & Rotary, Lions group meetings
- Agricultural shows

- Holding Governor 'surgeries' or 'meet your governor' sessions
- Making use of Trust sites

- School and college career fairs
- Uni open days
- Fetes, carnivals
- Charity and community events

- Newspapers, magazines, blogs, social media - a 'day in the life of'...
- Newsletters
- Briefings

What is missing?



What will success look like?

- Increased membership, retention and engagement of members
- Improved FFT feedback, more compliments and less complaints
- Improved staff satisfaction and engagement
- Better understanding of the Trust and the services it provides
- More dialogue around service provision at an earlier stage
- A more engaged public for our next consultation – development of an ‘involvement culture’
- The desired change we’re engaging about
- A more sustainable future for the Trust
- Improved relationships
- For the Trust to be seen as a partner others feel they can ‘do business with and trust’
- No surprises from inspections



What might go wrong?

- Poor execution – no involvement – or poor quality information gained
- Lots of data gained but no link to decisions made
- Reputational risk to the organisation
- Inconclusive or unwelcome outcome
- Unable to implement the outcome
- Expensive
- Scattergun approach
- Worsens local/clinical/staff relationships
- Future decisions seen as unaffected by involvement

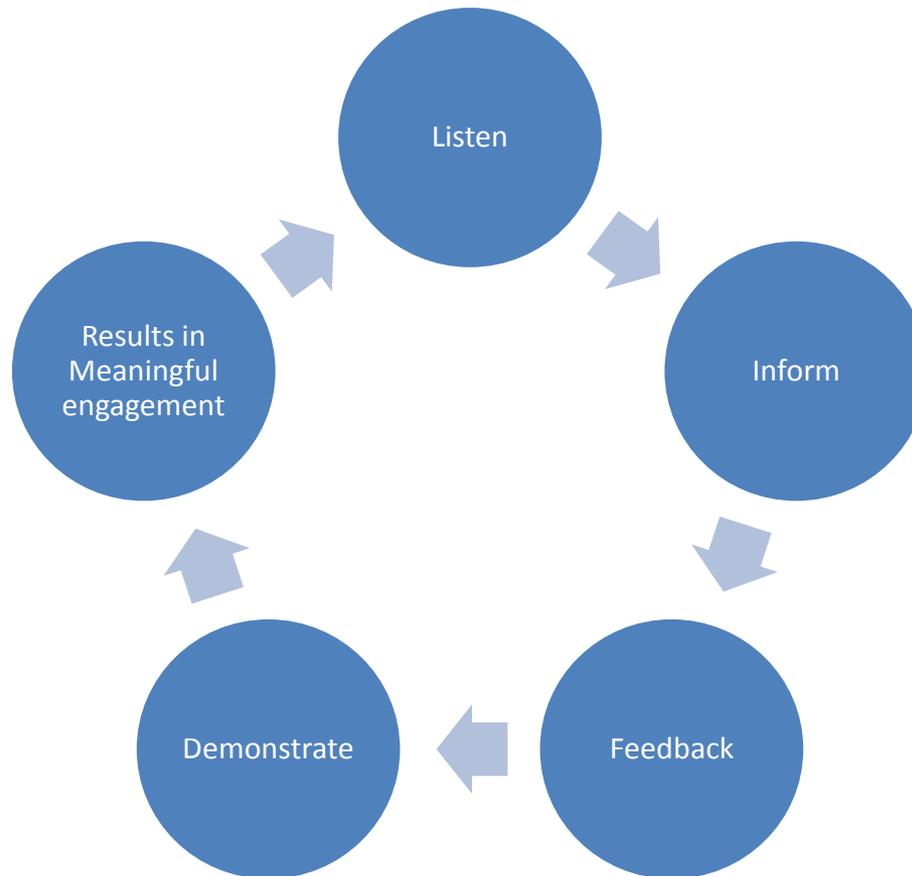


What can the Trust do to help?

- Foster an engagement culture where consultation and feedback are integral to decision making
- Champion the role of the governor within the Trust and in the community, involving them at the earliest possible stage with 'real' work
- Involve governors as much as possible in patient experience work
- Give governors clear, concise information and the resources, including personnel, to go out with confidence to engage
- Facilitate engagement with CCGs/Councils etc where appropriate
- Listen to governors and the information they bring back and use it demonstrably to influence decisions
- Allow governors to share their successes and build on them



The engagement cycle





How do we run the cycle?

LISTEN	INFORM	FEEDBACK	DEMONSTRATE
<ul style="list-style-type: none">• Ask open questions• Go out and about• Use social media• Piggy back onto existing opportunities• Identify your links/networks• Target events• Don't prejudge outcomes• Be informal and human	<ul style="list-style-type: none">• Use clear relevant info• Use practical and engaging activities to draw people to events (health talks, innovation, health checks etc)• Share and use our local networks	<ul style="list-style-type: none">• Explain how what they say will be used and when they can expect feedback/action• Show changes engagement has already created	<ul style="list-style-type: none">• This is our chance to show the value of engagement• Show the impact positive or negative• Use high energy• Embed any changes or innovations and continue the cycle



How can we do this?

- Making best use of the skills and networks you have
- Giving you what you need to help you to engage effectively
 - Briefings, materials and messages to share
- Creating opportunities to meet with key partners and stakeholders to share intelligence, learning and ideas
- Strengthen the approaches we have now
- Making engagement meaningful
- Listening, informing, feeding back and demonstrating



Keep reflecting

- Have we really understood listening?
- Are we just hearing what we want to hear?
- Are we truly engaged with engagement?



Some don'ts

- **Say more than you know** or is beyond your remit
- **Be a complaints service** – just listen and signpost
- **Neglect to feedback** – a waste of everyone's time
- **Forget to follow up** or not know how to do it
- Allow the Trust to **not process your feedback properly** or not demonstrate any appropriate change



Some 'do's

- To the extent of your knowledge and remit, **Listen and Inform**
- **Bring back** what you hear externally
- Make sure we have **processes and structures** to feedback properly
- Commit to being involved and leading this work as governors
- Make sure you **always get a response** when you have committed to giving one
- Ensure the response is **communicated**
- **Hold the Trust to account** for demonstrating any resultant change following engagement activity
- Keep **reflecting** --- are we really listening? are we engaging effectively? Is it making a difference? How can we keep improving?



Next steps

- Development of a draft governor involvement and draft membership engagement strategies and action plans
- Shared with Council for further views before being approved
- Governor development session on ‘holding the Board to account’ – the outcome will also be reflected in the governor involvement element of our strategy



Where you can find more information

- ‘Representing the interests of members and the public – examples and guidance for NHS FTs and governors (March 2015)
- ‘Your duties – a brief guide for NHS FT governors (March 2014)
- ‘Current practice in NHS Foundation Trust member recruitment and engagement’ (July 2011)



The following slides provide examples from a range of foundation trusts on engagement activity and its impact



Engagement into action – your statutory role

- Chesterfield's governors highlighted that patients waiting in their discharge area sometimes needed basic care. An HCA was employed to do this
- Governor pressure at Homerton brought greater focus on mixed sex accommodation, prompting quicker change
- Bournemouth's governors reviewed food provision. A new food ordering and delivery system was introduced shortly afterwards
- Kingston governors actively engaged in development of membership, governor involvement, patient and public involvement, volunteering and charitable fundraising strategies as well as service re-design projects – they became dementia champions, dining companions, collectors of FFT feedback, give talks inside and outside the Trust including to aspirant FTs



Engagement into action – your statutory role

- A former TV journalist governor at Salisbury has used his skills to make information DDVs for staff and patients
- Ridgeway Partnership, shadow governors worked on social responsibility projects with First Great Western Railways to improve communication and access for people with learning and physical disabilities.
- BSMHFT – set up a working group to review its practice against the recommendations in the Mind report on use of restraint as a result of a governor raising the issue. Some governors are active in MH voluntary groups, local GP patient groups and attend CCG Board meetings and other forums to pick up issues directly. The Trust put in place an improved waiting room enabling private conversations to take place, as a direct result from feedback received.



Engagement into action – constituencies and the wider community

- West Midlands ambulance service attended the local Big Bear Bash summer festival event with a demonstration ambulance, paramedics and freebies and signed up 783 new members over two days
- 2Gether MH trust – took a sofa to a wide range of events and filmed people talking about their MH experiences to break down stigma
- Bournemouth's governors harnessed people and member power to help overturn a blocked planning application for redevelopment of one its sites
- Staff governors at Bradford led the introduction of a staff suggestions scheme to help improve processes and save money
- King's College Hospital governors successfully campaigned for a major upgrade to their local railway station to assist disabled access



Engagement into action – constituencies and the wider community

- Oxleas offers local third sector organisations and business associate membership to facilitate the sharing of information, publicise each others work and let people know about campaigns and job opportunities
- Sherwood Forest hospital recruited around 200 members outside major local supermarkets in a few weeks
- Several Trusts including Addenbrookes and Leeds Community Healthcare Trust have youth councils or youth forums encouraging 13 – 18 year olds to engage in their communities on health issues



Engagement in action – engaging with members and making it meaningful

- A mental health trust's governors worked with a local drugs charity to recruit new members who are now proactively helping with the Trust's anti-drug work
- Royal Devon and Exeter FT has held several quarterly 'Members Say' events combining health information talks with feedback on specific issues such as reviewing the outpatient journey.
- One Trust segmented their newsletter and targeted different parts of their membership accordingly. Their response to surveys went up 43% and overall support from the membership is ten times strong than it was
- Berkshire Healthcare had a stand at Reading Pride Festival – their team talked to people about physical health, sexual health screening and mental health. Physical health checks were offered and non clinical staff and governors talked about the Trust and recruited 200 new members



- Cumbria Partnership found that members recruited face-to-face by governors were fewer but more involved in an ongoing basis with the Trust
- Dorset CCG's recent 'Big Ask' survey used the membership of all local FTs. Members had the opportunity to feed into the CCG's strategic work at the outset. The link with governors has continued.
- Royal Devon and Exeter had a series of focus groups discussing what compassionate care is and is not. The output was turned into a six minute cartoon film which has been used in training with staff.