

LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST

**Minutes of the Public Meeting of the Board of Directors
held on Thursday 31 January 2019 at 9:30 am
in Room 4, St George's Centre, Great George Street, Leeds LS1 3DL**

Board Members

Apologies

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| Prof S Proctor | Chair of the Trust |
| Prof J Baker | Non-executive Director |
| Mrs J Forster Adams | Chief Operating Officer |
| Miss H Grantham | Non-executive Director |
| Mrs D Hanwell | Chief Financial Officer and Deputy Chief Executive |
| Mrs C Holmes | Director of Organisational Development and Workforce |
| Dr C Kenwood | Medical Director |
| Dr S Munro | Chief Executive |
| Mrs M Sentamu | Non-executive Director |
| Mrs S White | Non-executive Director (Deputy Chair of the Trust) |
| Mrs C Woffendin | Director of Nursing, Quality and Professions |
| Mr M Wright | Non-executive Director |
| Mr S Wrigley-Howe | Non-executive Director (Senior Independent Director) |

All members of the Board have full voting rights

In attendance

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| Mrs C Hill | Associate Director for Corporate Governance / Trust Board Secretary |
| Mr A Marran | Incoming Non-executive Director |
| Three members of the public (one of whom was a member of the Council of Governors) | |

Action

19/001

The Chair opened the public meeting at 9.30 am. She welcomed members of the Board and those observing the meeting.

Sharing Stories (agenda item 1)

Prof Proctor welcomed Ms Alikhanizadeh who shared her story about the care her daughter had experienced. She also described her experience of being a carer for someone using the Trust's services and the difficulties and barriers there had been to being involved in her daughter's care.

Her story detailed a number of negative experiences both from her daughter's perspective, as a service user, and from a mother's perspective as a carer. During the course of her story Ms Alikhanizadeh offered suggestions as to how both their experiences might have been improved and what more the Trust could have done, which the Board noted.

Prof Proctor thanked Ms Alikhanizadeh for presenting her story. Dr Munro acknowledged that the experience for both Ms Alikhanizadeh and her daughter should have been better. She noted that the community redesign project was on the Board's agenda and that this would be discussed

acknowledging the experiences that Ms Alikhanizadeh had shared and that these would be fed back into the project. Mrs Forster Adams noted that the experience of Ms Alikhanizadeh was valuable in looking at how services can be made better. Mrs Woffendin noted that the offer to carers was currently being looked at as part of the review of Patient Experience and Involvement to ensure this is strengthened.

With regard to the wait to receive treatment experienced by Ms Alikhanizadeh's daughter, Mrs Forster Adams agreed to ask the Personality Disorder Service look into this specific matter and to liaise with her personally.

JFA

Members of the Board noted that this story had highlighted a theme of the issue of service user confidentiality potentially creating a barrier to a carer being involved in a service users' care. It was agreed that the Board needed to understand the boundaries of confidentiality and how this can impact on a carer's involvement. Dr Kenwood agreed to facilitate this session and Mrs Hill agreed to add this to the Board's forward plan.

CK / CHill

Prof Proctor thanked Ms Alikhanizadeh for sharing her difficult story and noted that her experience would be used to inform the design and review of services in the future.

The Board **thanked** Ms Alikhanizadeh for attending the Board and sharing her story. Directors **acknowledged** the points raised by Ms Alikhanizadeh, noting that these were important in informing the design and improvement of the Trust's services and that it helped to inform the discussion at the Board meeting.

19/002 Apologies for absence (agenda item 2)

There were no apologies for the meeting.

19/003 Declaration of interests for directors and any declared conflicts of interest in respect of agenda items (agenda item 3)

The Board noted that there were no changes to directors' declarations of interests. Mr Wright declared an interest in agenda item 18, the approval of the appointment of the Senior Independent Director and it was agreed that he would leave the meeting for that item. No other director at the meeting advised of any conflict of interest in relation to any agenda item.

19/004 Minutes of the previous meeting held on 29 November 2018 (agenda item 4)

The minutes of the meeting held on 29 November 2018 were **received** and **agreed** as an accurate record and were signed by the Chair.

19/005 Matters arising – update on the matters raised by the chair of the Mental Health Legislation Committee (agenda item 5.1)

Mrs Woffendin provided an update on the number of staff who had undertaken Mental Health Legislation Training noting that since the report made to the November Board there had been 105 staff trained in the Mental Health Act and 166 staff trained in the Deprivation of Liberty Safeguards. She noted that there had been significant improvement in the uptake in training, with some areas recording 100% compliance. However, she noted that for those staff still to be trained, managers were aware had a trajectory that set out how they would achieve compliance. She expressed confidence that the 85% compliance rate would be achieved and then sustained due to the targeted work being carried out.

With regard to the recording of capacity assessments by some clinicians. Mrs Woffendin noted that work was ongoing to understand the challenges being experienced in relation to recording and that support was being put in place to increase the level of recording. Dr Kenwood indicated that the assessments were being done, but were often not being recorded on the electronic system. She added that a member of the Continuous Improvement team was supporting the work to look at how the system could be improved.

The Board **received** and **noted** the update provided.

19/006 Actions outstanding from the public meetings of the Board of Directors (agenda item 6)

Prof Proctor presented the action log which showed those actions previously agreed by the Board in relation to the public meetings, those that had been completed and those that were still outstanding.

The Board **received** a log of the actions and **noted** the details, the timescales and progress.

19/007 Chief Executive's report (agenda item 7)

Dr Munro presented the Chief Executive's report. In particular she highlighted the visit undertaken to the Gender Identity Service and assured the Board of the discussions that had taken place with staff in relation to demand and referrals exceeding the size of the service that had been commissioned by NHS England.

Mrs White acknowledged and supported the work that had been done with the staff in the Gender Identity Service. She added that the Finance and Performance Committee had discussed the issues being experienced by the service in relation to capacity and demand, noting that this was being impacted by the delay in publishing the national tender specification. Mrs

White reported that the committee had expressed concern at the impact this delay was having and that there had been a discussion as to whether there should be some interim investment to ensure the continued quality of care. Dr Munro noted that the executive team had discussed this and had agreed that if there was added investment this should be invested in additional staff. Dr Munro added that additional funding was being discussed with NHS England and that an update would be brought to the March Board meeting.

SM

Mrs White then asked about winter pressures and how the Leeds system was managing this. Dr Munro advised that to date this was being managed better than in previous years and outlined the current position.

With regard to the ACAS report on bullying and harassment and the work being taken forward by the operational group 'The Culture Club', which was to be chaired by the Chief Executive, Prof Proctor asked what the deliverables would be. Dr Munro noted that the outputs would be agreed by the group at its initial meeting but that there was an expectation that this would not generate added work streams but would look at how we integrate and embed a positive culture of support for staff led by the leadership community. Dr Munro agreed to bring an update back to the March Board in relation to the work of this group.

SM

The Board **received** and **noted** the report from the Chief Executive.

19/008

Report from the Chair of the Quality Committee for the meetings held on 11 December 2018 and 15 January 2019 (agenda item 8)

Prof Baker presented a report on the work of the Quality Committee for the meetings held on 11 December 2018 and 15 January 2019. In particular, he drew particular attention to:

- Falsified medicines and the risk that the Trust would breach the Falsified Medicines Directive, due to be introduced in 2019. He noted there was a potential for the Trust and other NHS organisations more widely to breach the directive and that this was mainly due to technological reasons outside the control of the Trust. Dr Kenwood noted that the process that was being put in place to bar code and check medicines was in addition to all the other checks undertaken in relation to the provenance of the medicines used by the NHS. She added that the type of drugs used by the Trust were at low risk of being falsified; that the Trust was not an outlier in terms of the potential breach in compliance with the full requirements of the directive; that it was doing all it could to manage any potential risk; and that the risk of a breach had been logged on the Trust's risk register. She added that an update would be provided to the February Quality Committee meeting. The Board noted that there was a potential for there to be a breach of the Falsified Medicines Directive and was assured that the situation was being monitored and addressed appropriately
- The community redesign project and the assurances provided to the committee in relation to the engagement and involvement that had

taken place; the project's ongoing approach to service users' recovery; and ensuring there was a system to measure how the Trust was making a difference to service users and carers' lives

- A presentation from the acute inpatient services which had offered the committee an opportunity to understand the improvement work being undertaken
- The report from the external review in respect of service user and carer engagement and involvement, noting that the committee had highlighted the need for the Triangle of Care to be used more effectively to better support carers.

Prof Proctor sought assurance that the planned improvement work being undertaken in the acute inpatient services was on track and that further reports would be brought back to the committee. Dr Munro reported that external peer-support from East London NHS Foundation Trust was being provided to support Trust staff with the quality improvement work. Mrs Forster Adams also noted that the Board would be receiving a report on this at the March Board.

JFA

Mrs Woffendin reported that on behalf of the Board the Quality Committee had received and reviewed the Annual Safeguarding Report as this was required by national guidance. Prof Baker reported that the committee had been assured by the report and also acknowledged that this year's report had been much improved in terms of content in comparison to those presented in previous years.

The Board **received** the report from the chair of the Quality Committee and **noted** the matters raised.

19/009

Report from the chair of the Audit Committee for the meeting held on 22 January 2019 (agenda item 9)

Mr Wright presented a report on the work of the Audit Committee for the meeting held on 22 January 2019. In particular, he drew particular attention to:

- An update on progress in relation to the review of the health and safety management arrangements in the Trust and also an update on how the recommendations from the recent Health and Safety inspection would be taken forward, noting that the committee had been assured of the arrangements in place
- The internal auditors' report, noting that since the last meeting, two audits had been concluded: *Programme Set Up, Care Director*, which had received significant assurance and the *Appraisal Process*. Mr Wright noted that whilst the appraisal process had received limited assurance the committee had been assured of the actions being taken to address the recommendations.

The Board **received** the report from the chair of the Audit Committee and **noted** the matters raised.

19/010

Report from the chair of the Finance and Performance Committee for the meetings held 18 December 2018 and 29 January 2019 (agenda item 10)

Mrs White presented a report on the work of the Finance and Performance Committee for the meeting held on 18 December 2018 and 29 January 2019. In particular, she drew particular attention to:

- A detailed review of the business case for the National Centre for Psychological Medicine, noting that this had also been received by the Board at its Extraordinary meeting on the 18 December 2018
- The improvement in the access targets reported in the performance report
- Out of Area Placements and the trajectory for 2019/20, noting that the committee had observed that the trajectory for 2018/19 had not been achieved and that it had questioned the Trust's ability to achieve next year's trajectory. However, Mrs White noted that in relation to the 2019/20 trajectory the committee had received assurance in regard to there being a costed action plan to meet the trajectory and had also been made aware of the risks to achieving the plan. Mrs White reported that the committee was assured there was a plan in place for 2019/20 trajectory and noted that it would continue to receive reports on progress
- Financial position and the overall rating of '1', noting that whilst the Trust would slightly exceed the control total this had been due to one off fortuitous items received in year and that the underlying position was one of the Trust being in deficit
- The breach of the agency cap, noting that the committee had discussed some of the actions required to bring the Trust back under the cap by the end of 2019/20
- Capacity, both at an executive level and more generally, in relation to the work that would be required to respond to the 10-year plan, the operational plan and also the wider system responsibilities. Mrs White noted that the committee had agreed to bring the issue of capacity to the attention of the Board and to suggest the need for there to be consideration as to how the commitments will be prioritised. Dr Munro noted that the executive team was in the process of looking at the resource requirements to achieve the priorities for the coming year.

In relation to the breach of the agency cap and the plan to reduce the reliance on locum medics, Dr Kenwood outlined some of the difficulties being experienced in regard to retaining and recruiting medical staff. However, she noted that a recent appointment panel had appointed four medical staff which had been a very positive outcome. Dr Kenwood noted that as part of the operational plan, actions had been identified to address medical staffing issues.

The Board **received** the update report from the Chair of the Finance Performance Committee for the meetings that took place on 18 December 2018 and 29 January 2019.

19/011

Combined Quality and Performance Report (CQPR) (agenda item 11)

Mrs Forster Adams presented the CQPR noting that the Finance and Performance Committee and the Quality Committee had looked in detail at the information in the report. Mrs Forster Adams drew particular attention to the access targets, the gender identity service, and out of area placements noting that these areas had already been discussed in some detail by the Board.

However, with regard to out of area placements and inpatient services, Mrs Forster Adams noted that there were three material things that would impact positively on both the metrics and the quality of care and that there were the redesign of the community services, the development of the out of hospital and crisis services, and the acute care excellence programme.

Mr Wrigley-Howe asked about the autism service noting that the KPI measured was not access to the service but was the time to reach a diagnosis. He asked if this was an accurate measure given the variability of achieving a diagnosis for individual service users. The Board noted that whilst it was necessary to measure the time to reach a diagnosis it was then more important to get the right pathway of care in place for service users once the diagnosis had been made, particularly as each service users' needs would vary following that diagnosis.

Prof Baker then noted that there had been a reduction in the use of restrictive practices which he added was very positive. He also reported that this had been discussed at the Quality Committee. Dr Munro advised that it was important to fully understand why this was and that it was likely due to a number of different factors including a change in practice in some services, for example the use of Trauma Informed Approach to care which was being used in the Forensic Services.

Prof Baker also noted that there would be a report presented to the Quality Committee in February in respect of supervision, performance against the target and also the quality of the supervision provided.

Miss Grantham noted the importance of working in partnership across the system in Leeds. She added that it was important to understand the impact on the Trust's own performance and quality measures which can be caused as a result of the way in which other organisations provide their services. Dr Munro suggested that it would be helpful for the Board to look again at the Joint Strategic Needs Analysis and the pilot work in relation to Population Health Management, both of which will feed into the refreshed Leeds Plan, and to invite key people from within the city to come and talk to the Board about these areas of work. She agreed to work with Mrs Hill to look for a date when this can be programmed into the Board's schedule.

SM

Mr Wright drew attention to the 'probability for violence assessment' which it was reported were undertaken within three months of admission. He asked whether it was appropriate to wait three months to carry out this assessment. Dr Kenwood assured the Board that service users would come into the service with an assessment already having been undertaken and that the assessment within three months would be a refresh of the initial one carried out. She also noted that the assessment was complex and could take up to three months; therefore, the timeframe for it to be undertaken was not a delay in this being refreshed, but a reflection of its complexity.

Mr Wright also noted that in relation to the Friends and Family Test there had been a drop in the percentage of people recommending the Trust's services and asked why this might be. Mrs Woffendin explained that it was important to understand the context in which the responses had been given. Also that the questions were set nationally for the NHS and therefore the answers given may not be easy to apply to mental health settings. She added it was important to look at other ways in which the Trust receives feedback to fully understand the views of service users and their experience and that this was part of the service user and carer engagement work which was currently being undertaken.

The Board **received** the Combined Quality and Performance Report and **noted** the content.

19/012

Safer staffing summary report (agenda item 12)

Mrs Woffendin presented the safer staffing summary report which covered two months and highlighted a number of key points. She advised that there had been five breaches during these two months which had occurred on wards at the Mount and Asket Croft. Mrs Woffendin expressed some concern in relation to the breaches adding that she had looked into this matter further. She advised that having spoken with executive colleagues it had been agreed that there would be a workshop with the staff on the wards concerned to explore solutions including the effective use of e-Rostering to ensure the right mix of staff are on the wards at various times of the day.

In relation to the pressures in recruiting nursing staff and how this then impacted on ward staffing levels, Mrs Woffendin outlined the actions being taken to promote the recruitment of nursing staff to address the pressures in the system at the current time.

Prof Baker asked about the Keith Hurst benchmarking tool. He noted that whilst he personally did not support the tool, he wanted to understand why this had not yet been distributed for use by the Trust. Mrs Woffendin explained the reasons for this, adding that there had been consideration of starting to use the tool ahead of NHS Improvement publishing it. However, she noted that the drawback with this would be that this would result in the Trust having to analyse the data rather than this being done through the full package. She noted that the executive team was considering the options in relation to a way forward in the short-term.

The Board supported the Safer Staffing report, noting that it was providing it with the information it required; however, Mrs Woffendin agreed to share benchmarking data in regard to nursing vacancies once a year through this report.

The Board **received** the Safer Staffing summary report and **noted** the content.

19/013

Community redesign update (agenda item 13)

Mrs Forster Adams presented the community redesign update report, noting that this had been discussed in detail at the January Quality Committee, particularly how the redesign of services would improve the quality of care for service users. Mrs Forster Adams outlined the engagement work which had taken place as part of the project and explained how this had informed the work.

Mrs Forster Adams advised that the Local Authority Scrutiny Committee had received a report on the project in November 2018 and had supported the work being undertaken. She added that it had asked for an evaluation report at some point in late 2019.

Mrs White asked about the use of digital technology going forward particularly in light of this being detailed in the NHS Long-term Plan. The Board discussed some of the initiatives currently in place to support staff in delivering care in different ways. It agreed to have a strategic session to understand how the Trust was embracing the digital agenda. Mrs Hanwell agreed to facilitate this session. Mrs Hill agreed to schedule this in for later in the year.

DH / Chill

The Board **received** the report and **noted** the detail provided in the paper.

19/014

Update on the smoke-free policy and its application (agenda item 14)

Mrs Woffendin presented the update report and highlighted the key points detailed in the paper. The Board discussed the paper. Prof Baker asked about the use of e-cigarettes. It was noted that this matter was still under review and Dr Munro outlined the work and considerations that were ongoing in relation to this matter through both the Fire Safety Task and Finish Group and the Smoke-Free Steering Group.

Mrs White asked when the Smoke-free Policy review would be completed. Mrs Woffendin reported that the revised policy was expected to be in place for 1 April 2019. The Board then discussed the issue of service users who need to be accompanied when taking a cigarette break outside of the ward environment, noting that this needed further consideration both from the perspective of the impact on staffing levels and the potential estates solutions.

The Board **received** the update report in relation to the application of the smoke-free policy.

19/015

Workforce and organisational development report (agenda item 15)

The Board received the workforce and organisational development report, noting that the focus of the report was the benchmarking of the Trust's performance on Workforce Race Equality Standard (WRES) metrics in relation to other Mental Health Trusts.

Mrs Holmes highlighted the main points in the report. She noted that the report demonstrated the Trust compared favourably in most areas but that more work was required in relation to improving issues such as: the relative likelihood of appointment from shortlisting; accessing development opportunities; and reducing bullying, harassment or abuse from service users, relatives or the public.

Mrs Holmes noted that the Workforce Disability Equality metrics had now been released and agreed to bring a report back to the Board in October.

CH

With regard to the apprenticeship levy, Mrs Holmes agreed to bring a more detailed report back to the Finance and Performance Committee on progress relating to apprenticeship spend against the financial metrics and that a report on the impact of apprenticeships on the quality of care would go to the Quality Committee in July.

CH

With regard to clinical supervision and appraisals, Mrs Holmes noted that this had been discussed in a number of fora. She reported that there was work ongoing to look at the current policy to ensure this reflects the needs of the different professions and that the policy would be reviewed in the light of the outcome of the discussions.

The Board discussed the report in some detail. A question was asked about the unions and how they were ensuring their stewards were sufficiently diverse and therefore meet the needs of their membership. Mrs Holmes agreed to speak with Staffside in relation to diversity and inclusion and whether the trade unions were promoting this within the recruitment of their cohort of stewards.

CH

With regard to bank staff being more likely to be involved in a disciplinary issue, Mrs Sentamu asked how this was being managed to ensure there was equity in the way bank staff and substantive members of staff were being treated. Mrs Holmes outlined the feedback received in relation to the disciplinary process and the work to ensure that this was being applied equitably.

With regard to equity in access to CPD, it was agreed that the executive team would consider whether it had assurance that CPD is being resourced and accessed in an equitable manner across the different professions and how this would be fed back to the Board either directly or through its committee structure.

Exec

The Board **received** the report, **noted** the content and was **assured** of the work being undertaken.

19/016

Report from the Chief Financial Officer (agenda item 16)

Mrs Hanwell highlighted the key messages in the report. She indicated that it provided an overview of the financial position at the end of December 2018 and also included the forecast outturn position for 2018/19 with a general update on operational planning cycle for 2019/20.

Mrs Hanwell advised that the position at month nine remained ahead of plan but only as a result of completing the PFI refinance deal in December 2018. She added that the financial score was '1' but again that this was due to a high surplus ratio as a consequence of the Provider Sustainability Funding and also the PFI refinance. With regard to risks, Mrs Hanwell reported that the most significant risks continued to be expenditure on out of area placements and inpatient staffing.

With regard to the control total for 2019/20, Mrs Hanwell referred to the discussion at the January Board development session and reminded the Board that it had agreed that the control total issued to the Trust was reasonable and as such would be confirmed as accepted within the draft Operational Plan that would be submitted to NHS Improvement on 12 February 2019.

Prof Baker asked about the estates plan to change bath taps only at this point given that these had been a known ligature anchor point for some time. Mrs Hanwell explained that the replacement of taps referred to in the plan had been rolled out in a managed and prioritised way; that this had been done over a period of time; and that taps in those areas assessed as high risk had already been replaced and those specifically referred to in the report were in areas assessed as being of low risk.

The Board **received** the report from the Chief Financial Officer and **noted** the content. It also **confirmed** acceptance of the Control Total for 2019/20 in the draft Operational Plan submission on 12 February and **approved** delegated authority to both the Chief Executive and Chief Financial Officer to sign the draft version.

19/017

Sustainable Development Management (SDM) Plan for approval (agenda item 17)

Mrs Hanwell presented the SDM plan, noting that this had been discussed in detail at the Finance and Performance Committee. Mrs White noted that there was to be a Sustainability Steering Group which would monitor the action plan and ensure progress. Mrs White also noted that sustainability was not just an estates issue but had a number of cross-cutting themes and therefore needed wider organisational and system support.

It was noted that there was to be a session with the Council of Governors in May. With regard to the governance arrangements, there was to be a steering group that would provide assurance to the Finance and Performance Committee in terms of progress against the action plan. It was noted that in addition to the assurance provided to the committee there would be an annual report to the Board.

The Board **received** and **endorsed** the Sustainability Development Management plan.

19/018 Approval of the appointment of the Senior Independent Director (SID)
(agenda item 18)

Mr Wright left the meeting

The Board noted that Mr Wrigley-Howe would be coming to the end of his term of office on 16 February 2019 and as such it would need to appoint another non-executive director as the Senior Independent Director. It considered and agreed that Mr Wright be appointed as the SID.

The Board **agreed** to appoint Mr Wright as the Senior Independent Director.

Mr Wright re-joined the meeting.

19/019 Use of the Trust's seal (agenda item 19)

The Board noted that since the November Board meeting the seal had been used on four occasions all in relation to the PFI refinancing deal. It noted that the documents sealed were:

- Log 111 - Deed of variation and supplemental agreement in relation to the 29 February 2000 project agreement
- Log 112 – Deed of variation to the leases at Parkside Lodge, Asket Croft, Asket House, Newsam Centre, The Mount, Little Woodhouse Hall and the Becklin Centre
- Log 113 – the funder's direct agreement
- Log 114 – the deed of confirmation.

The Board **noted** the occasions on which the seal had been used.

19/020 Any other business

Prof Proctor noted that this was the last meeting for Mr Wrigley-Howe as he would be stepping down as a non-executive director on 16 February 2019. She thanked Mr Wrigley-Howe for the very valuable contribution he had made to the work of the Board and for his personal commitment to the work of the Trust more widely. She then wished him all the very best in his new endeavours and the Board thanked him in the usual way.

19/021 Glossary (agenda item 20)

The Board received the glossary.

19/022 Resolution to move to a private meeting of the Board of Directors (agenda item 21)

At the conclusion of business the Chair closed the public meeting of the Board of Directors at 12.50 and thanked members of the Board and members of the public for attending.

The Chair then resolved that members of the public be excluded from the meeting having regard to the confidential nature of the business transacted, publicity on which would be prejudicial to the public interest.

Signed (Chair of the Trust)

Date