

LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST

**Minutes of the Public Meeting of the Board of Directors
held on Thursday 29 October 2020 at 9:30 am.
This meeting was held virtually via teleconference facilities**

Board Members

Apologies

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
Mr C Henry	Non-executive Director
Mrs C Holmes	Director of Organisational Development and Workforce
Dr C Hosker	Medical Director
Mr A Marran	Non-executive Director
Dr S Munro	Chief Executive
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 (Senior Independent Director)

All members of the Board have full voting rights

In attendance

Mrs C Hill	Associate Director for Corporate Governance / Trust Board Secretary
Ms K McMann	Deputy Trust Board Secretary
Dr B Alderson	Speciality Trainee and Guardian of Safe-working Hours (for minute 20/130)
Five members of the public (all of whom were governors)	

Action

20/124

Prof Proctor opened the public meeting at 9.30 am and welcomed everyone.

Sharing stories (agenda item 1)

The Board heard the story of Farzana who was a service user of the Perinatal Service. The story was introduced by Bal Dosanjh (Clinical Engagement, Access and Inclusion Co-ordinator) who had supported Farzana in recording her story. Farzana explained her experience including: the stigma regarding mental illness and how this had affected her; her cultural needs during her stay in hospital and the degree to which these were met, including the steps she took to address this with staff; the support she had received from the groups she was involved with; the importance of her faith and how her religious needs were met during her stay; and the need for there to be more education within BAME communities of the impact of COVID-19 on their health.

Farzana also spoke about the blogs she had written and the positive impact these have had on her and others. Ms Donsajh agreed to provide a link to these so they could be circulated to members of the Board.

BD

Ms Donsajh also spoke about the importance of staff understanding the part a person's cultural background and influences play in supporting a service user's recovery; and also the importance of reaching out to minority communities to ensure there is sufficient education regarding mental illness and how to access services. She noted that this was an important part of her role and outlined some of the work she was doing to take this forward.

The Board thanked Farzana and Ms Donsajh for speaking to the Board and providing a powerful insightful to the cultural issues raised.

20/125 Apologies for absence (agenda item 2)

There were no apologies received.

20/126 Declaration of interests for directors and any declared conflicts of interest in respect of agenda items (agenda item 3)

It was noted that no director had a change in their declarations of interest.

It was also noted that Mr Wright had a conflict of interest in agenda item 19 (the appointment of the Senior Independent Director) and noted that he would leave the meeting for that item. The Board noted that no other director at the meeting had advised of any conflict of interest in relation to any agenda item.

20/127 Minutes of the previous meeting held on 24 September 2020 (agenda item 4)

Mrs Hill noted that Dr Kenwood had been listed as present at the September Board meeting rather than Dr Hosker. She agreed to amend this in the minutes.

CH

The minutes of the meeting held on 24 September 2020 were **received** and **agreed** as an accurate record subject to the change outlined above.

20/128 Matters arising (agenda item 5)

The Board **noted** there were no matters arising that were not either on the agenda or on the action log.

20/129 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. It **noted** the details, the timescales and progress.

20/130

Report from the Safe-working Guardian (agenda item 15)

Dr Alderson gave an overview of the Guardian of Safe Working Annual Report for the period 1 April 2019 to 31 March 2020, noting that this had been delayed in coming to Board due to COVID-19.

He also provided an overview of the Quarter One report which provided assurance that doctors in training were safely rostered and that their working hours were compliant with the Junior Doctors' Contract and Terms and Conditions. He explained the reasons for the gaps that had been detailed in the report and how these had been addressed. He also assured the Board that these had not presented a risk to service user safety. Dr Alderson then explained the governance arrangements in place to report on, discuss and escalate any issues which may emerge with regard to safe working.

The Board discussed the report, noting that it was informative and provided a good level of detail and assurance on the issues that it highlighted. Dr Alderson then spoke about the preparations for winter and the second wave of COVID-19 noting that based on learning from the first wave of COVID-19 the Trust was as prepared as it could be at this time in terms of medical cover. With regard to clinical supervision, Dr Alderson explained the contractual requirements for supervision adding that there was an expectation that this would continue through the pandemic. He then outlined the escalation process should doctors not be able to access the necessary supervision.

The Board **thanked** Dr Alderson for attending the Board and presenting the Guardian of Safe Working report and was **assured** as to the content and governance arrangements in place.

20/131

Chief Executive's report (agenda item 7)

Dr Munro provided a verbal Chief Executive's Report. She reminded the Board that it was Black History Month and that the events organised in the Trust by the Race Equality Network would be coming to a conclusion shortly. She used a recent story in the news about a black American citizen with a mental health issue who had been in crisis and the unacceptable negative response to that individual from the police to illustrate the continuing importance of focusing on this important area of work. She also spoke about the presentation to the Health and Wellbeing Board on the progress being made through the Synergi Collaborative, noting there had been a firm recommitment from all partners in the city to take a whole-system approach to the over representation of black Afro-Caribbean men within acute services.

Dr Munro advised that the West Yorkshire BAME review had been published

and that this had a focus on mental health. It was agreed that this report would be circulated to Board members.

With regard to COVID-19 she noted that leaders in West Yorkshire were negotiating with the government the potential for the region to go into Tier 3, and that these negotiations were also looking at how the region might exit from that Tier at a later date. She added that leaders were cognisant of the fact that any decisions made in the coming days would have a direct impact on the mental health and wellbeing of citizens which could stretch over the next five to ten years. In relation to this she explained there would need to be further consideration as to what the funding arrangements might be for this added demand. With regard to the York area, Dr Munro pointed out that the North Yorkshire region would likely remain in Tier 2, adding that due to the Trust's services spanning these two areas, directors were looking at how these two different Tiers might impact on the way services were delivered, noting that this issue was being explored with the Directors of Public Health.

Dr Munro then spoke about the Nightingale Hospital in the West Yorkshire and Harrogate ICS, noting that staff within the Trust were coordinating the in-reach for liaison psychiatry into this hospital, adding that the use of the Harrogate Nightingale Hospital remains a last resort and would only be brought into use where the acute capacity within the general hospital was at its maximum.

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

20/132

Report from the Chair of the Quality Committee for the meeting held on 13 October 2020 (agenda item 8)

Prof Baker provided a report from the Quality Committee meeting that had taken place on 13 October 2020. In particular he reported on:

- The Research and Development annual report, noting that this provided detailed information on work in this area and highlighted the importance of ensuring R&D continues to support the development and provision of high quality services.
- Recommendations from the First Do No Harm Report with a focus on Sodium Valproate and the avoidance of its use for women of child bearing age. He noted that the effects of this had been known for some time but that some GPs were continuing to prescribe the drug to some female service users and as such this was an issue that would need to be addressed across the system.
- The draft Quality Report and Accounts for 2019/20, highlighting the comments that had been received from partners which the committee had considered.
- Gaps in data in the Combined Quality and Workforce Report, noting that the committee had discussed its concern at the lack of some data sets.
- Safeguarding, noting that whilst the committee had been assured of the arrangements in place within the Trust there had been a sense that the number of safeguarding matters reported were possibly lower

than anticipated, given the impact of current events on vulnerable families including that of COVID-19.

- The Gender Identity Service, in particular a strategic risk which had been identified around deprioritising services and concerns around the plans for the waiting list for the Trust's Gender Identity Service. He added that the Ethics Committee had been asked to look at this matter.

Mrs White reported that the Finance and Performance Committee had received a report about the work to address the gaps in data, which had indicated that work would likely be completed by end December 2020. Mrs Forster Adams agreed to share this report with all members of the Board. She also reminded the Board that at the point where CareDirector had been implemented, it had been reported that data would not be available in full until the end of quarter 2, but that this work had been constrained due to the impact of COVID-19 and that it was now anticipated that this work would be completed by the end of quarter 3.

JFA

With regard to the Gender Identity Service, Mrs White supported the need for the Board to agree its position and clearly explain to service users any impact there might be to services as a result of, for example, the redeployment of staff as a result of COVID-19 or the impact of any commissioning decisions. She added that this matter was due to be discussed at the Joint Committee meeting on 10 November.

Mrs Forster Adams noted that the report from the Chair of the Quality Committee had used the term 'de-prioritisation' of services and had referenced the Gender Identity Service within this discussion. She noted that as part of any emergency planning it was standard practice to have a process of prioritisation of services but that at no point was the Trust's Gender Identity Service closed to referrals. However, she noted that the ability to respond to any referrals received had been significantly compromised by the redeployment of staff in order to manage the impact of the pandemic.

Prof Baker clarified that the point had been about future waiting lists potentially being closed rather than the current waiting list, the Board noted this amendment. The Board then discussed this matter in some detail. Dr Munro agreed to email the Chair of the National Specialist Commissioning Board to ask for there to be an update on the national strategy for Gender ID and also on the Primary Care Pilot to de-medicalise access to the service. In addition she agreed to include the issue of the impact on the mental health of individuals when placed on the waiting list for long periods of time.

SM

Prof Proctor asked for the issue of prescribing Sodium Valproate to women of childbearing age to be raised through the Clinical Commissioning Groups and Primary Care partners to ensure there was a wide understanding of the risks and impact.

SM

The Board also agreed that Bill Fawcett and Nikki Cooper were to be invited to the November private Board meeting so it could better understand the gaps in data reporting and the programme of work going forward to address this. Mrs Hill agreed to arrange this.

CHill

The Board **received** the report from the Chair of the Quality Committee.

20/133

Report from the Chair of the Workforce Committee for the meeting held 15 October 2020 (agenda item 9)

Miss Grantham presented a report from the Workforce Committee for the meeting that had taken place on 15 October 2020. In particular she drew attention to:

- The Terms of Reference for the committee, noting that these were being reviewed to ensure they reflect the priorities of the committee, including their role around equality and diversity.
- How the role of the non-executive director Wellbeing Champion would be fulfilled through the committee as a whole.
- Wellbeing assessments, noting that the committee had been assured on progress with particular reference to bank staff from BAME backgrounds.
- The People Plan, noting that this was a particular focus for the committee and that assurance had been received on the work being carried out to achieve the actions.
- Appraisals being restarted within the Trust, and the work to ensure the 85% target completion rate was achieved.
- Clinical Supervision, adding that the committee had been assured on the work in respect of these being carried out for all relevant groups of staff.

Mrs Woffendin advised the Board of the discussions that had taken place with the CQC Relationship Manager and the assurances that had been received in relation to their position on the Trust restarting the appraisals and working towards the achievement of its target. Mrs Holmes noted that progress against the 85% target would be discussed by the Executive Directors. It was agreed that a report would come back to the November Board meeting regarding the outcome of the discussion at EMT on the trajectory and target for appraisals and clinical supervision.

CHol

The Board **received** the update report from the Chair of the Workforce Committee.

20/134

Report from the Chair of the Audit Committee for the meeting held 20 October 2020 (agenda item 10)

Mr Wright presented a report for the Audit Committee meeting that had taken place on 20 October 2020. In particular he drew attention to:

- The Quality Report, noting that the committee had been very complementary of the process for its completion, the content and its accessibility.
- The Internal Audit Progress Report which had provided an update on

the re-audit of two areas previously awarded 'limited assurance' (Management of Contracts and Service Users' Money and Property) noting that these had both now been given 'significant assurance' in terms of the procedures. However he added that there would be further work to validate the operation of these procedures to look at how effective they were.

- The Health and Safety Annual Report, noting that there was to be a meeting of Mr Wright, Miss Grantham, Mrs Hanwell and Mrs Holmes to look at the detail of the report. He also outlined the plans that were in place to strengthen the management structure within the health and safety function.

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

20/135

Report from the Chair of the Finance and Performance Committee for the meeting held on 27 October 2020 (agenda item 11)

Mrs White presented the report from the Finance and Performance Committee for the meeting that had taken place on 27 October 2020. In particular she drew attention to:

- Performance data and the impact that working in different ways due to COVID-19 had had on the achievement of some targets and standards. In addition she drew attention to the data gaps and the discussion at the committee relating to how these would be addressed.
- Assurances around the plans to strengthen the Information Team in order to take forward the digital transformation agenda.
- The deep-dive on three performance issues relating to the Acute Liaison Psychiatry Service, the Gender Identity Service, and physical health monitoring.
- Winter resilience and planning, noting that the committee was supportive of the arrangements that had been put in place and was appreciative of the level of detail in the report.
- EU Exit, noting that further information was expected from the centre and that this would be looked at again at the November committee meeting.

With regard to deep-dives into specific areas, there was an acknowledgement that many of these had cross-cutting themes over a number of Board sub-committees. It was also acknowledged that reporting to a number of different committees on similar matters had an impact on the capacity of staff. It was agreed that this would be discussed in more detail at the Joint Committee meeting on 10 November. Mrs Hill agreed to add this to the agenda.

Prof Proctor noted that there was currently a pilot of virtual service visits and that these would help provide a deeper understanding of some of the issues facing services. Prof Proctor noted that following the service visits there would be a programme put in place for non-executive directors and

CHill

governors. It was agreed that a list of the service visits would go to the Joint Committee meeting. Cath Hill agreed to provide a paper to the committee.

CHill

With regard to the arrangements for planning for EU Exit, Prof Proctor asked that an update report be scheduled for the November Board meeting.

JFA

The Board **received** the report on behalf of the Chair of the Finance and Performance Committee and **noted** the matters reported on.

20/136

Combined Quality, Performance and Workforce Report (agenda item 12)

Mrs Forster Adams presented the paper, noting that this had been discussed in detail at the various Board sub-committee meetings. She acknowledged that there were ongoing discussions as to how appropriate some of the targets now were in the light of new ways in which the Trust was currently providing services as a result of the impact of COVID-19. She also noted that there was ongoing work to look at data gaps and how these would be addressed going forward.

Mrs White noted that the report showed that the number of restraints had increased and sought further information on this. Mrs Woffendin reported that further enquiries had been made and that this additional information had shown that there was nothing of concern in relation to these instances; that some had been due to reporting errors and also due to the complexity of the care of some individual service users. She added that the Quality Committee had received a detailed update at its meeting on 13 October and had been assured of this additional information.

Mrs White noted that workforce vacancies were reported as either stable or, in some areas, slightly increased and asked whether the Trust had observed leaver rates slowing down due, for example, the increase in unemployment rates in the job market. Mrs Holmes reported that in regard to vacancies there were compensating statistics in different parts of the Trust which overall showed a fairly stable position. However, she added that the Trust's establishment had increased overall and that this had impacted on the picture provided by the statistics.

The Board **received** and **noted** the content of the Combined Quality, Performance and Workforce Report performance report.

20/137

Report from the Chief Financial Officer (agenda item 13)

Mrs Hanwell drew out the key issues in the report and noted that for months one to six the Trust had been operating within the interim financial framework, adding that there were no material issues of concern to report.

With regard to months seven to 12 she explained that separate work was underway to develop a financial plan for this period and that the plan would be considered in the private Board meeting. In addition she reported that

further work was underway to begin financial planning for 2021/22 and recognised the complexity of the on-going pandemic and the uncertainty of the financial framework which would be in place in the future.

Prof Proctor asked about the impact of cumulative losses in the commercial income generating activities and asked what the level of risk was in relation to this. Mrs Hanwell noted that there had been a specific paper to the Finance and Performance Committee in relation to this and that the situation was being effectively managed and the risks had been assessed as being very low.

Prof Baker asked how radical the Trust could be in relation to capital expenditure, particularly given that staff were working in very different ways and there was now a question over the traditional use of estate. Mrs Hanwell noted that staff had been supported with additional equipment for use at home. With regard to the traditional use of estate she added that there needed to be further consideration as to how this was used and the impact this would have on the Estates Strategy. It was agreed that the executive team would consider when a strategic discussion on the Estates Strategic Plan could be programmed into the Board's forward plan.

DH

The Board **received** the report from the Chief Financial Officer and **noted** the content.

20/138

Quality Report and Accounts 2019/20 (agenda item 14)

Mrs Woffendin presented the Quality Report and Accounts 2019/20 for approval. She explained that the Report had been produced in consultation with service users, staff, carers, governors and stakeholders.

She reported that the timescale for the completion of the 2019/20 Quality Report and Accounts had been amended as a result of the COVID-19 pandemic, with the deadline for online publication and submission to the Secretary of State extended beyond the 30 June 2020. She added that NHS England and Improvement had recommended that Trusts should aim to provide draft accounts to stakeholders by the 15 October 2020 and finalise these for publication by 15 December 2020. Mrs Woffendin outlined the governance process that had been following including presentation to the Quality Committee and Audit Committee where it had received very positive feedback.

The Board commended the document and acknowledged the huge amount of information it contained about how services were provided and how quality is assured. The Board also thanked the team for making this an accessible document.

The Board **received** and **approved** the Quality Report and Accounts for 2019/20.

Workforce Race Equality Standard and Workforce Disability Equality Standard report (agenda item 16)

Mrs Holmes presented the report noting that it detailed the equality data required under the regulatory framework and highlighted key areas of focus. She also provided details of the WRES (Workforce Race and Equality Standards) and WDES (Workforce Disability and Equality Standards) action plans noting that these were due to be published by 31 October 2020.

She noted that the data showed that although there were several areas of improvement and several areas where the Trust had outperformed Mental Health peers, there remained a differential in experience between BAME and disabled colleagues when compared to those who were white or non-disabled.

Mrs Holmes reported that the current position remained unacceptable and that significant improvement was required to ensure a fair and inclusive experience for all staff. She then outlined some of the priority actions to address the inequality and improve the experience of staff, noting that these had been presented to and supported by the Executive Management Team in September 2020. She also added that there had been wide staff engagement through a number of networks to co-produce the actions which was a principle integral to the Trust's strategic equality and inclusion plan.

The Board welcomed the plan and discussed it in detail.

Miss Grantham asked where the Trust was looking for points of learning. Mrs Holmes reported that there was a wide network of shared knowledge with information being drawn from throughout the region and also nationally. In particular, she noted that those organisations that benchmark well were being approached for shared learning.

With regard to the importance of ensuring that staff make declarations, Mrs Homes outlined the work that was being undertaken through the Culture Collaborative Programme and Inclusive Leadership initiative to ensure staff understood the importance of the need to make the necessary declarations.

Mrs White asked about the recruitment of people with learning disabilities and what programmes were in place to support this. Mrs Holmes reported that with COVID-19 some of this work had been paused and would need to be revisited.

Prof Proctor noted that there was a Reciprocal Mentorship Programme in place and suggested that the learning, themes and issues from the programme should be discussed at a Board workshop in April / May. In addition to this she asked Mr Henry to lead part of that session on the learning from the Seacole Programme.

Mr Henry commented on the lack of diversity within senior leadership roles, noting that there was a lot of work outlined in the report that could be built on. He also commented on the use of 'BAME' as a term to describe all ethnic backgrounds and the offence this can sometimes cause.

**CHol /
CHen**

The Board **received** the report, it was **assured** by the detail in the action plan and also the progress against the standards.

20/140

Update report on preparations for winter (agenda item 17)

Mrs Forster Adams presented the update report in the context of the continued impact of the COVID-19 pandemic on winter planning, noting that the document provided a combination of technical, governance and operating arrangements.

She added that it was a dynamic plan that would continue to be refreshed throughout the winter including the response to the impact of the on-going pandemic. She assured the Board that heading into winter the Trust was better prepared for the consequences of the pandemic and that learning from wave one had been used to inform the winter plan.

Mrs Forster Adams reported that the plan had been shared with members of the Finance and Performance Committee, where it had been well received. She set out the main areas of risk in particular staff availability. She added that a pool of staff was being established which could be deployed in a worst case business continuity situation, but that at the current time there was no plan to stop providing any of the Trust's services and that there was an expectation that the current level of provision would be maintained through the dynamic use of staff.

The Board commended the report and suggested that it should be shared with staff and governors. It was agreed that they would receive a summary of the winter plan. Mrs Forster Adams agreed to liaise with the Communications Team to develop a summary version.

JFA

Miss Grantham asked if there was sufficient support for the Gold, Silver and Bronze levels of command. Mrs Forster Adams assured the Board on the arrangements for resilience for each of these levels which the Board discussed. Dr Munro also outlined the support that had been put in place for the executive team so they had a safe space to discuss the ongoing arrangements and highlight any emerging issues with regard to capacity. She also supported the suggestion that if further support was required from the Board she would bring this back for further discussion.

The Board **received** and **endorsed** the arrangements for winter planning.

20/141

Board Assurance Framework (agenda item 18)

Dr Munro presented the refreshed Board Assurance Framework noting that this had been updated in light of the impact of the COVID-19 pandemic. She added that this would now start to be presented to each of the relevant Board sub-committees for their consideration. Mrs Woffendin noted that some incorrect narrative had inadvertently been included in one of the assurance descriptions for Risk 1 which Mrs Hill agreed to remove this.

CHill

The Board **received** and **noted** the content of the Board Assurance Framework.

Mr Wright left the meeting.

20/142

Appointment of the Senior Independent Directors (agenda item 19)

Prof Proctor drew attention to the proposal that Mr Wright be re-appointed as the Senior Independent Director for a further two years, which the Board considered and approved. It was noted that during the time of this second appointment Mr Wright would look at identifying a potential successor.

The Board **considered** and **approved** the appointment of Mr Wright as the Senior Independent Director for a further period of two years with effect from 17 February 2021.

20/143

Proposed changes to the Constitution and its Annexes (agenda item 20)

Mrs Hill outlined the proposed changes to the Constitution and its Annexes noting that these had been updates to reflect how the Board and Council of Governors now operate. She noted that once it had been reviewed and approved by the Board it would then be presented to the Council of Governors for further approval, after which time the changes would come into effect.

With regard to the seat on the Council of Governors currently reserved for Equitix, Dr Munro asked Board members to consider which partner organisation this should now be offered to given that Equitix had indicated that they would not be putting anyone forward to take up this seat. It was suggested that this was explored in more detail in the private part of the Board meeting.

Mrs White suggested that in light of working across a greater footprint and in light of the new and emerging governance systems which would be less competitive, that consideration be given to the Constitution allowing the appointment of joint non-executive directors (i.e. across two organisations) and also for there to be consideration of appointing associate non-executive directors with a specific skill-set and potentially for the purpose of succession planning.

Prof Proctor suggested that this be considered at a future point in time once it was clear what the impact of any emerging legislative changes were.

The Board **considered** and **approved** the proposed changes to the Constitution.

20/144 **The use of the seal** (agenda item 21)

It was **noted** that the seal had not been used since the last Board meeting.

20/145 **Any other business** (agenda item 17)

There were no items of any other business.

20/146 **Resolution to move to a private meeting of the Board of Directors**

At the conclusion of business the Chair closed the public meeting of the Board of Directors at 12:55 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.