

LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST

**Minutes of the Public Meeting of the Board of Directors  
held on Thursday 30 July 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 Kenwood	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
Dr W Neil	Trust's Responsible Officer and Old Age Consultant Psychiatrist (minute 20/088)
Dr C Hosker	Consultant Psychiatrist (observing as the incoming Medical Director)
Ms K McMann	Deputy Trust Board Secretary

**Action**

20/085

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

**Sharing stories** (agenda item 1)

Prof Proctor welcomed Andrea Wardle, a volunteer Assistant Support Worker on the wards in the Becklin Centre. Ms Wardle talked about the reasons she had become a volunteer, what it meant to her to be a volunteer and also her experience of working as an Assistant Support Worker on the wards particularly during the COVID-19 pandemic.

Ms Wardle drew out some of the positive aspects of volunteering including being able to help and support people; having a sense of belonging and purpose; and developing new transferable skills. Ms Wardle then spoke about some of the difficulties she had experienced on the ward during the COVID-19 pandemic including those resulting from wearing PPE, which she said was very uncomfortable during the hot weather and also created a barrier between staff and some service users. She also noted that during the hot weather there had been no air conditioning on the ward which had made

the environment difficult to work in.

Prof Proctor thanked Ms Wardle for her honesty and insight and invited the Board to ask questions.

Mrs White noted that Ms Wardle had spoken about some elements of discrimination she had experienced in the past and asked if she had felt supported whilst working on the male ward at the Becklin Centre. Ms Wardle confirmed that whilst there had been periods of discrimination in other parts of her life she had felt very safe and supported by everyone she had worked with on the ward. Mrs White also noted that Ms Wardle had done some work volunteering for a community forest garden and suggested that they speak outside of the meeting about how this experience might be used within the Trust. It was agreed that Ms Wardle's contact details would be shared with Mrs White.

**KM**

Dr Munro thanked Ms Wardle for sharing her experiences and suggested that these could be shared with others to encourage more people to volunteer. Miss Grantham then asked if there was anything that could be done to make the process of volunteering better. Ms Wardle noted that whilst it had taken a little time for a position to become available there wasn't much else that could be changed.

Mrs Woffendin then talked about the issues of wearing PPE during hot weather linked to the matter of the air conditioning in the units not being switched on. She advised that due to the potential to spread the virus the Trust was not utilising the air conditioning and recognised that this could create an uncomfortable the environment in which staff have to work.

Prof Proctor thanked Ms Wardle for sharing her experiences with the Board and wished her all the best in her now job at the Newsam Centre. Mrs Hill agreed to write to Ms Wardle thanking her for sharing her story.

**CHill**

**20/086 Apologies for absence** (agenda item 2)

Apologies were received from Dr Claire Kenwood, Medical Director and Mr Cleveland Henry, Non-executive Director.

**20/087 Declaration of interests for directors and any declared conflicts of interest in respect of agenda items** (agenda item 3)

It was noted that Miss Grantham's declarations of interest had changed since the last meeting and that she had taken on the role of Director at the Otley Golf Club. This was noted by the Board. It was also noted that no other director had a change in their declarations of interest and that no director at the meeting had advised of any conflict of interest in relation to any agenda item.

**20/088 Responsible Officer's Annual Report** (agenda item 12)

Dr Neil presented the Responsible Officer's Annual Report. She provided an overview of the report and drew attention to the main points and the work that had been carried out over the year particularly in relation to medical

revalidation, medical appraisals and the new governance arrangements that had been put in place to support this work.

Miss Grantham noted that there had been a delay in the equality impact assessments due to COVID-19 and suggested that if support was needed with this Dr Neil might want to speak to the executive team. Mrs Holmes suggested that Dr Neil makes contact with herself and Caroline Bamford.

The Board **confirmed** that the report provided the necessary assurance and that this could be signed by the Chair of the Trust.

20/089

### Questions from Governors

Prof Proctor noted that there had been two questions submitted by Sally Rawcliffe-Foo (staff governor) who had asked what the Trust's preparations were for a potential second wave later in the year, and also whether Rose Ward at Clifton House could be used to meet the COVID-19 secure requirements.

Dr Munro noted that the Chief Executive's report later in the meeting would outline the preparations for a potential both a second wave and winter. With regard to the use of Rose Ward at Clifton House, Dr Munro advised that whilst changes could have been made to the physical environment to meet the COVID-19 secure requirements, there were issues with ensuring that sufficient staff would be available to work on the ward. She added that it was due to the issues of staffing that Rose Ward had not been utilised. She then further outlined the considerations that had been made as to the possibility of using Rose Ward, noting that members of the Forensic Leadership Team had been involved in these discussions. Mrs Forster Adams agreed to speak to members of the Leadership Team and to Mrs Rawcliffe-Foo to ensure they were aware of the rationale for the decisions taken.

JFA

20/090

### Minutes of the previous meeting held on 25 June 2020 (agenda item 4.1)

The Board considered the minutes of the meeting held on 25 June 2020. Mr Wright noted that there was a spelling error on minute 20/076 and that minute 20/079 incorrectly referred to the Finance and Performance Committee and should have referred to the Workforce Committee. Mrs Hill agreed to amend the minutes.

CHill

The minutes of the meeting held on 25 June 2020 were **received** and **agreed** as an accurate record, subject to the amendments outlined above.

20/091

### 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.

20/092

**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.

With regard to action 19/144, Prof Proctor asked when this report would come back to the Board. Mrs Hanwell reminded the Board that prior to the outbreak of COVID-19 there had been an agreement reached with the Leeds Clinical Commissioning Group that the contract for 2020/21 would include £2m funding for safe staffing, but that national events had overtaken the contract being finalised. However, she then noted that during the COVID-19 pandemic staffing levels had been provided to those required and funding had been provided by central government under the national arrangements.

With regard to the new financial framework, Mrs Hanwell advised that there was much work still to do to understand its impact and also understand the regime under which the NHS would operate and how this might affect the Trust's budgetary position.

Mrs Woffendin advised that the Safer Staffing Group had been re-established, although she noted that the Trust was not required to recommence the submission of monthly staff staffing compliance data to NHS England. However, she indicated that the Safe Staffing report to the Board in January would provide an update on the position.

Prof Proctor asked for a verbal update on progress at either the September or October Board meeting depending on when the financial planning guidance was issued.

DH

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

20/093

**Chief Executive's report** (agenda item 7)

Dr Munro advised the Board of the national position, noting that the management of the COVID-19 pandemic was still operating at a Level 4 Major Incident and was still being managed on a control and command basis by NHS England. However, she noted that the focus of the management of the incident was shifting to stepping services back up throughout the country and that the main area of concern was the increasing waiting lists and backlog within the acute sector.

Dr Munro then advised that the NHS People Plan had been published,

adding that its main focus was tactical and addressed only the next 12 months. However, she added that next year the Plan would be followed up by a five-year People Plan which would be more strategic in the areas it addressed.

With regard to the Leeds System, Dr Munro reported that Leeds Gold Command continued to meet every two weeks noting that the focus of these meetings was winter planning, including the preparations for the administering the flu vaccination, and planning for a potential second wave.

With regard to the Trust, Dr Munro advised that the organisation was still operating under the national Level 4 Major Incident, but that the response arrangements had been stepped back as the situation was stabilising. She added that the focus was on moving back to addressing an increase in requests for admissions and the pressure on the Crisis Services and inpatient beds. She noted that there had been an increase in the use of Out of Area Placements and that discussions were taking place at an ICS level as to how this might be addressed in partnership with other providers.

Mrs Forster Adams provided an update on clinical services. She advised that most services continued to operate, with specialist services beginning to re-start. With regard to bringing people safely back to the workplace she noted that the evaluation of individual work environments was underway with those areas from which clinical services were delivered being completed first. Mrs Forster Adams then noted that new local operating procedures were being finalised which addressed the changes to the way services were being provided due to the COVID-19 pandemic and that information was being made available to the public, setting out what people could expect when visiting those services.

Mrs Forster Adams then provided details of the workforce, noting that staff had been encouraged to take annual leave following this period of intense workload. She also outlined the messages that had been conveyed to staff in relation to the new quarantine and support arrangements for any staff returning from those places abroad that now had quarantine restrictions, so they could take leave safely. She assured the Board that managers were working with staff to understand the number that were planning overseas leave during the summer months, noting that currently the number was very low and that any potential impact was limited.

Mrs Holmes spoke about the arrangements for the re-deployment of staff, noting that 50% of re-deployed staff had returned to their substantive roles adding that the re-deployment function and processes remained in place should it be needed in the coming months. With regard to Wellbeing Assessments, Mrs Holmes advised that these were ongoing with good progress being made. She added that 82% of substantive BAME staff had now completed their assessments with their managers. Mrs Holmes then spoke about the NHS People Plan noting that there was a focus on wellbeing and outlined some of the detail of the Plan.

On behalf of the Medical Director, Dr Hosker noted that it was a mixed picture in relation to the recruitment of medics, but that the Trust had been successful in recruiting to two vacant posts. He then outlined the posts that

were currently in the process of being recruited to.

Mrs Hanwell noted that the work to bring staff safely back to the workplace was the main area of focus for her work-stream and that to help support this piece of work an interim role for a Return to Work Co-ordinator had been established. Mrs Hanwell noted that whilst the workplace was being made safe for some staff to return to, staff in the main were being encouraged and supported to work from home. She then outlined the arrangements that had been put in place to support this.

Mrs Woffendin noted that it was 10 weeks since there had been a COVID-19 positive inpatient, although there were eleven who were on the ward who were post-COVID-19 and recovered. Mrs Woffendin noted that the Trust had an outbreak plan which was now on all wards and in clinical areas.

With regard to PPE, Mrs Woffendin noted that a recent audit had shown some areas of non-compliance and that a letter had been sent out to all staff to reiterate the importance of maintaining the correct level of compliance with the guidelines. She then outlined the infection prevention arrangements and also the physical health arrangements that were in place and the way in which the teams were operating. Mrs Woffendin then spoke about the data for infections relating to Leeds noting that this was currently very low. She also outlined some of the arrangements that would be in place should the infection rate start to rise.

Prof Proctor thanked the executive team for the updates. She then invited the Board to ask questions. Miss Grantham asked about the increase in demand for services and sought to understand if this was due only to the effects of 'lockdown' or if it was a more long-term sustained increase that could have been predicted. Mrs Forster Adams noted that the demand was not yet excessive and was reaching the point of being consistent with levels experienced over recent years. However, she noted that in the case of the acute services there was a greater level of acuity being observed in terms of complexity and behaviour and that this linked with the different ways in which services would need to be provided and the different operating models it would have an impact on the pressure for services.

Mr Marran asked if details of the work relating to the dietetics team could be circulated to the Board. Mrs Woffendin agreed to do this.

**CW**

Mrs White asked for clarification on the information about services which was being made available publically. She also asked if service users had been involved in determining changes to services and whether this had been linked to the patient experience programme. Mrs Forster Adams advised that the information was designed to inform and reassure service users of what they can expect when they use our services, particularly as there had been some changes to the methods of engaging with service users and the types of technological solutions available to ensure they remained safe. Mrs Woffendin then advised on the patient experience work and the evaluation of learning from COVID-19 and how the Patient Experience Team was linked into this.

Prof Baker asked if the Trust was providing information to staff about how

they could claim tax relief for working from home. Mrs Hanwell indicated that the position on this was complex and agreed to look again at what might be possible in terms of support to staff in this regard.

Miss Grantham welcomed the work that had been undertaken in relation to quarantine arrangements. She also welcomed the work in relation to homeworking and also beginning people safely back to the workplace.

With regard to the Board to Board meeting on the 10 September with the governors, Prof Proctor asked for the high-level key issues from the NHS People Plan to be outlined at the meeting. She also asked for this to consider the impact of COVID-19 on the mental health wellbeing of NHS and care staff and how this demand would be provided by mental health trusts.

Prof Proctor also noted that if there was a second wave or an impact on staff due to winter flu the Trust would need to rely on volunteers she therefore asked for assurance as to where the volunteers plan was being addressed. Mrs Holmes noted that because some volunteers will return to their substantive employers as furlough comes to an end, it was important to look at the how the Trust will attract more volunteers in preparation for a second wave. She added that this was being picked up through the Resourcing Plan.

The Board **received** and **noted** the report from the Chief Executive and the Executive Directors in relation to the arrangements for the management of impact of COVID-19 on the Trust.

20/094

**Report from the Chair of the Quality Committee for the meeting held 14 July 2020** (agenda item 8)

Prof Baker presented the report from the Quality Committee for the meeting held on 14 July 2020. He drew particular attention to the report on restrictive interventions which had been discussed at the meeting, concluding that there had been assurance that there had not been a significant change in the total figures of the use of seclusion and physical restraint and welcomed the positive measures that had been adopted by staff.

With regard to the Safeguarding Annual Report, Prof Baker noted that this had provided a detailed overview the work of the Safeguarding Team in 2019/20 and that the committee had acknowledged the improvements made that had been made to Safeguarding over the last few years.

Prof Baker also reported that the committee had discussed and supported the continuation of the Ethics Committee. The Board discussed where it should sit within the governance structure and where it should report to in order ensure it maintains its ability to consider clinical practice in an open, non-judgemental and psychologically safe way. It acknowledged that the committee's current position in the governance structure, with assurances to the Quality Committee was appropriate for the work of the Ethics Committee, noting that a section in the Quality Committee's Annual Report to the Board would provide a further level of assurance on the work of the

Ethics Committee. In terms of time commitment for members of the Ethics Committee it was agreed that Dr Hosker would speak to Dr Munro on this matter.

**CHosker**

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

**20/095**

**Report from the Chair of the Audit Committee for the meeting held 21 July 2020** (agenda item 9)

Mr Wright presented the report from the Audit Committee meeting held on 21 July 2020. In particular he drew attention to the audit reports that had been presented to the committee, noting that four reports had been given significant assurance with only the Capital Programme audit having been assessed as limited assurance, however, he noted that the committee had been assured on the actions that would be taken to address the findings.

With regard to the Child and Adolescent Mental Health Unit which is being built on the St Mary's Hospital site, Mr Wright suggested that the Board should receive an update on progress with this project. Prof Proctor asked the meeting of the Boards of the Trust and Leeds Community Healthcare NHS Trust is progressed and a date sought.

**CHill**

Mr Wright noted that the programme of internal audit work had been reviewed and that the committee had supported the changes and approved the plan with the exception of the audit of Cyber Security, which it agreed should be brought back into quarter three. He also noted that the committee had asked to be made aware of any slippage in the plan due to the number of audits that had been deferred to later in the financial year and the pressure there already was in completing these audits.

Mr Wright also noted that the committee had discussed the Board Assurance Framework and the need to progress the update of information in the BAF.

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

**20/096**

**Report from the Chair of the Finance and Performance Committee 27 July 2020** (agenda item 10)

Mrs White presented a verbal report of the matters that had been discussed by members of the Finance and performance Committee on 27 July 2020. In particular:

- The financial position, noting that assurance had been received in relation to the COVID-19 expenditure which to date had been reimbursed in full by NHS Improvement / England and that any further ongoing expenditure was decreasing.

- Contract development, noting that work on the West Yorkshire Eating Disorder Provider Collaborative was progressing and that the Board will need to receive and agree the submission in September.
- The closure of the inpatient personality disorder unit (Garrow House) provided in partnership with the third sector, noting that the committee had received assurance that robust alternative arrangements had been made for the seven residents currently in the unit.

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

20/097

**Operational performance report** (agenda item 11.1)

Mrs Forster Adams presented the report noting that this had been presented and discussed in detail at the Finance and Performance Committee and that the main points had been highlighted earlier in the Board agenda.

Mrs White asked about the ability to capture data on ethnicity recording. Mrs Forster Adams provided a general update on progress with the reporting on a number of data sets, noting that it was anticipated that these would start to feed through into the performance reports in the coming weeks. Mrs Forster Adams agreed to pick up the matter of ethnicity reporting with the Head of Performance. The Board acknowledged the importance of receiving information on ethnicity, equality and inclusion.

JFA

Prof Baker noted that the Trust was benchmarking well in relation to the three-day follow-up target.

The Board **received** and **noted** the content of the operational performance report.

20/098

**Report from the Chief Financial Officer** (agenda item 11.2)

Mrs Hanwell presented the Chief Financial Officer's report. In particular she highlighted the need to continue to manage expenditure on COVID-19 related activities although she assured the Board that this was being well managed and that there were no areas of concern to report.

She also assured the Board on the prospective capital bids for COVID-19 expenditure, noting that whilst it was not yet clear if specific items of funding would be approved she had authorised the work for those items that were considered to be of significant importance for the Trust ahead of receiving authorisation.

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

20/099

**Smoke-free Policy update report** (agenda item 13)

Mrs Woffendin provided the Board with an update on the smoke-free policy, noting that the Trust had now become smoke-free. She paid tribute to the work that had been undertaken to achieve this, noting that a lot of work had been done during the pilot by the Smoke-free Lead and the eight Healthy Living Advisors to support staff and service users in reaching this point.

Mrs Woffendin noted that feedback had been sought from staff and service users and that overall this had been very positive.

Dr Munro also paid tribute to the team in achieving this and the way in this had been rolled out across the Trust.

The Board **received** the update and noted that the Trust had achieved smoke-free status.

20/100

**Use of the seal** (agenda item 14)

Prof Proctor noted that the seal had been used on two occasions since the last meeting:

- Log number 122: Unit A and A1, Ground Floor, 34-36 Springwell Road, Leeds LS12 1AW – licence to carry out works.
- Log number 123: Stage 4 contract with Interserve Construction for the build of the West Yorkshire Inpatient CAMHS unit on the St Mary’s Hospital site.

The Board noted that the seal had be applied on two occasions since the last meeting.

20/101

**Any other business** (agenda item 15)

There were no items of any other business.

The Chair of the Trust closed the meeting at 12:05 and thanked everyone for attending.

Signed (Chair of the Trust) .....

Date .....