

LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST

Minutes of the Public Meeting of the Board of Directors **held on Thursday 25 March 2021 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 (Deputy Chair of the Trust)
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
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
Three members of the public (one of whom was a governor)	

Action

	<p>Prof Proctor opened the public meeting at 9.30 am and welcomed everyone. She advised that on this occasion there would be no 'Patient Story'; that this was an exceptional situation due to the heavy agendas for both the public and private Board meetings and that it was felt that the May meeting would provide more protected time for the story to be heard by the Board.</p>
21/024	<p>Apologies for absence (agenda item 1)</p> <p>There were no apologies received.</p>
21/025	<p>Declaration of interests for directors and any declared conflicts of interest in respect of agenda items (agenda item 2)</p> <p>Dr Munro advised the Board that she had been appointed as a Trustee of the Workforce Development Trust. This was noted by the Board.</p> <p>It was also noted that no other director had any change in their declarations of interest and no director advised of any conflict of interest in any agenda item scheduled for the meeting.</p>

<p>21/026</p>	<p>Minutes of the previous meeting held on 28 January 2021 (agenda item 3)</p> <p>The minutes of the meeting held on 28 January 2021 were received and agreed as an accurate record.</p>	
<p>21/027</p>	<p>Matters arising (agenda item 4)</p> <p>The Board noted there were no matters arising that were not either on the agenda or on the action log.</p>	
<p>21/028</p>	<p>Actions outstanding from the public meetings of the Board of Directors (agenda item 5)</p> <p>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.</p> <p>The Board discussed the action relating to the Whistleblowing and Freedom to Speak Up Procedure. Mrs Holmes noted that there had been some confusion within the procedure relating to the role and function of whistleblowing as opposed to speaking up and that the confusion had been compounded by combining these aspects into one document. She advised that because of this a decision had been taken to create two separate but aligned procedures and that she was working with Mr Verity to achieve this.</p> <p>It was noted that the term ‘whistleblowing’ sometimes created hesitancy in reporting and there was, in some cases, a lack of understanding of the steps that needed to be taken in a whistleblowing situation. It was also noted that there was more work to be done to ensure the Freedom to Speak Up Procedure and the Whistleblowing Procedure were aligned and that ‘speaking up’ did not preclude a person ‘whistleblowing’ at a future point in time should this be felt necessary. Mrs Holmes agreed to look at this further.</p> <p>Prof Proctor also noted that there had been a national Freedom to Speak Up Guardian report which she had asked Mr Verity to look at and to incorporate into his report to the May Board setting out any recommendations that related to the Trust.</p> <p>The Board received a log of the actions. It noted the details, the timescales and progress.</p>	<p>CHol</p> <p>JV</p>
<p>21/029</p>	<p>Chief Executive’s report (agenda item 6)</p> <p>Dr Munro provided a verbal Chief Executive’s Report. She firstly reported on the work relating to the White Paper relating to the governance</p>	

framework for Integrated Care Systems (ICS), noting that there were a number of working groups looking at what needed to be in place ready for ICSs being put onto a statutory footing on 1 April 2022. She then outlined the discussions that had taken place at an ICS level in relation to: the Mental Health Investment Standard; the operating model for mental health services within the ICS; and the capital allocation being at an ICS level including the impact this might have on the available capital funding for mental health and community services.

With regard to Provider Collaboratives, Dr Munro reported that these would be more permissive in nature and there was to be a consultation on the technical guidance noting this would commence in April 2021. She added that there was an indication that the role of Boards, non-executive directors and Councils of Governors would be more explicit in relation to governance around provider collaboratives.

Dr Munro then reported on the NHS England Planning Guidance for 2021/22 which was due to be published in the coming days. She noted there had been a regional meeting that had looked at the content of the guidance and she outlined the five key priorities within it, namely: the health and wellbeing of staff; the delivery of the COVID-19 vaccination programme; the restoration of activity in elective cancer treatment and mental health care; expanding the offer in primary care; and redesigning the community and emergency care pathways. Dr Munro reported on the financial arrangements for the NHS noting that for April to September funding would be through block contracts, with a set allocation for COVID costs.

With regard to the Trust, Dr Munro advised that a new lead for the health and wellbeing of staff had now been appointed and that they would be looking at how best to support staff within the Trust. She also reported that 88% of staff had received their first dose of the COVID-19 vaccine with 20% of those having also received their second dose. She spoke about the Trust's own programme to vaccinate service users reporting that so far 1000 people had received their first dose. In relation to reset and restoration, Dr Munro explained that a number of meetings in the city had already taken place to look at this next phase of work and that this would be looked at in more detail in relation to the work of the Trust in the coming weeks.

Prof Proctor reported that an ICS Chair's Group had been established and a sector representative appointed from amongst that group to be part of a West Yorkshire Health and Local Authority Reference Group. She added that the role of the Chair's Group would be to reflect on and discuss proposals rather than being a formal decision-making group.

Mrs White asked about the national 1% pay award for health service staff and the stance that the Board should take in relation to this. She also asked in what forums this was being raised on behalf of employees. Dr Munro reported that there was wide acceptance that the 1% pay award was not believed to be adequate. She reported that the matter had been picked by NHS Providers and that their response would be fed into the national debate. Mrs Holmes added that NHS Employers and some of the unions did not feel that the 1% pay award was sufficiently adequate and that discussions were ongoing in relation to this. With regard to the Board's

position in relation to this matter, Prof Proctor noted that the pay review bodies were in a process of negotiation; that the Board should be aware of the sensitivities relating to the pay offer; and that senior staff should remain linked into local discussions and maintain a dialogue and a presence in relation to this matter.

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

21/030

Report from the Chair of the Mental Health Legislation Committee for the meeting held on 2 February 2021 (agenda item 8)

Mr Marran presented the Chair's report from the Mental Health Legislation Committee for the meeting that had taken place on 2 February 2021. In particular he drew attention to:

- The outcome of the work in the Trust following the recommendations from the Devon Case Review which had determined that detentions carried out remotely were illegal. He reported that staff at the Trust had reviewed all remote assessments for inpatients and that this had identified seven detentions where remote assessments had taken place and that all but one service user had been discharged from the Mental Health Act (MHA) by the time the review had been completed. He added that in regard to this services user their care team had been informed and they had been discharged and reassessed under the MHA. With regard to the service users on Community Treatment Orders (CTOs), Mr Marran noted that despite the ruling only being in relation to inpatients the Mental Health Legislation Team were looking at the community service users on CTOs as well.

Prof Baker questioned the level of detail in the report and suggested that it might not be appropriate for a public paper. Mr Marran agreed to look at the paper and reissue with less detail.

AM

The Board **received** the report from the Chair of the Mental Health Committee and noted the matters reported on.

21/031

Report from the Chair of the Quality Committee for the meetings held on 9 February 2021 and 9 March 2021 (agenda item 9)

Prof Baker presented the Chair's report from the Quality Committee for the meetings that had taken place on 9 February and 9 March 2021. In particular he drew attention to:

- The quality of care provided within inpatient environments during the second wave of the COVID pandemic, noting that the committee had looked at this issue and had noted that therapeutic activities on wards had been reduced for a brief period of time to allow a focus on maintaining staffing levels across the Trust. However, he noted that the committee had been assured of the plans now in place in relation

to maintaining future levels of therapeutic activities.

- The update on the Trust's approach to suicide prevention and the governance arrangements in place. He added that the committee had noted the agreed priorities for the Safe and Effective Care Group and three sub-groups and had agreed that a further, more detailed update would be provided in six months.

Mrs Woffendin commented on the impact on quality there had been as a result of the Trust focusing on managing the effect of the COVID-19 pandemic. She noted that in recent months there had been a number of COVID-19 outbreaks which had been managed effectively, but which had taken staff away from some of their normal duties on the wards. She added that whilst quality from a therapeutic perspective was compromised there were no breaches in the safe levels of staffing.

Prof Proctor asked if a review of the handling of the pandemic had been undertaken and whether any lessons learnt would be implemented ahead of winter 2021. Mrs Foster Adams assured the Board that reviews around the management of the pandemic including acting on any lessons, had been carried out repeatedly throughout the past 12 months and that these would inform processes to manage any issues which might arise in the coming months.

Mr Wright asked about the vaccination programme and the recent announcement by the Government of the proposal to vaccinate all care homes staff. He asked if this would likely be applied to all NHS staff given that they work with vulnerable people and work out in care homes. Dr Munro explained the approach being taken by the Trust and the supportive processes in place to work with staff who may be hesitant to have the vaccine. She also spoke about the procedures in place relating to the wearing of appropriate PPE and the infection prevention procedures in place. She added that any plan to mandate the vaccination of NHS staff would require a change in the contractual arrangements. Mrs Woffendin added that the professional regulatory bodies were not supporting a programme of compulsory COVID-19 vaccination at this point.

Prof Proctor asked if the Ethical Advisory Group could explore some of the issues around the compulsory vaccination for staff. Dr Hosker agreed to follow this up with the Group.

CHos

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

21/032

Report from the Chair of the Workforce Committee for the meeting held on 1 December 2020 (agenda item 11)

Miss Grantham presented the report from the Workforce Committee for the meeting that had taken place on 1 December 2020. In particular she drew attention to:

- A report outlining the integrated and evidence based review of clinical

leadership in order to support its development within the Trust, noting the in-depth discussion that had taken place and the assurances that had been received.

- Recruitment and retention and the challenges faced by the Trust including the work underway to address some of these issues.

In relation to the professional workforce strategies for Nursing and Allied Health Professionals, which sat beneath the Workforce Strategic Plan, Miss Grantham reported that the committee had noted that some of these needed to be refreshed and she asked the Board to consider how it would wish to approach the refresh of these alongside the refresh of the overarching Workforce Strategic Plan. It was also noted that the Workforce Strategic Plan and the other four strategic plans had a high level of interconnectivity and that it would be difficult to refresh any in isolation to the others. It was agreed that this would be discussed in more detail in the private session of the Board later in the day.

Prof Baker asked about the McCloud judgement which referred to a Court of Appeal's ruling that the Government's 2015 public sector pension reforms unlawfully treated existing public sector employees differently based upon a members' age. Specifically Prof Baker asked if there had been any impact on staff retention due to this ruling. Mrs Holmes noted that it was early days for the judgement and that the Trust would be working with individual staff impacted adversely by this. It was suggested that once the position was clear the Board receive a report through the Workforce Committee detailing any impact of this judgement and any risks for the organisation.

CHol

Mr Wright asked about the increase in referrals to occupational health and whether this was something the Board needed to be sighted on. Miss Grantham advised that the increase was due to the service being promoted through wellbeing conversations that managers were having with all their staff, and that this had been seen as being proactive support for staff and therefore a positive reason for the increase in referrals.

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

21/033

Report from the Chair of the Finance and Performance Committee for the meeting held on 23 March 2021 (agenda item 10)

Mrs White presented the Chair's report from the Finance and Performance Committee for the meeting that had taken place on 23 March 2021. In particular she drew attention to:

- The current uncertain position in relation to capital allocations and expenditure limits going forward, including the need to prepare a plan in preparation for 2028 when the PFI arrangements would come to an end.
- The current provider collaborative proposals in which the Trust had an interest, adding that the West Yorkshire and the Humber Coast and Vale ICS collaboratives had been rescheduled and would now

start from 1 July 2021. Mrs White explained that this would allow more time for the consideration of the opportunities and risks including clarification of the NHS England financial allocations.

- The Combined Quality, Performance and Workforce Report, noting that the committee had been assured that following the developments required as a result of the implementation of Care Director the majority of the data within the report was now accurate and complete.

Mrs Hanwell talked about the need to refresh the strategic estates plan for the ICS, noting that the future plans for the PFI assets would need to be included in the revised plan. Prof Proctor asked for the timing of this to be factored into the discussion on the strategic plans that would take place later in the day in the private Board session.

With regard to the Acute Care Excellence work, Mrs Forster Adams noted that there had been an action from the joint Quality, Finance and Performance, and Workforce Committee that a common understanding was needed from the Board as to what the expectations were of this piece of improvement work, what it was aiming to do and what it was seeking to achieve. It was agreed that this would be picked up in the private session.

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

21/034

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

Mrs Forster Adams reminded the Board that all aspects of this report had been looked at in the various Board sub-committees and that some of the issues reported on were contained in the reports from the Chairs of the sub-committees which had already been received by the Board.

Mrs Forster Adams noted that the report was presented in the context of the organisation experiencing a level of disruption due to managing the impact of the COVID-19 pandemic. She added that this had affected the way in which the organisation had operated. She also noted that the Trust was entering a period of reset and restoration which would entail working with staff and service users to look at the innovations that had already been introduced, including ways of building on these to ensure the Trust continued to provide services in a flexible adaptive way and was able to respond to any further disruption that might occur.

With regard to performance, Mrs Forster Adams reported that whilst activity levels had remained consistently high there had been variability in terms of performance given the disruption caused by winter and the pandemic.

The Board paid tribute to the dedication, adaptability and flexibility of staff in dealing with the impact of the pandemic. It also formally thanked the Head of Performance and their team for the continuing the development of the CQPR.

Miss Grantham noted the improvement in response time by the ALPS team. Mrs Forster Adams acknowledged that they were working very differently and that having a practitioner in the Accident and Emergency department was having a positive impact on performance.

Miss Grantham also asked about the physical health assessments and whether the Trust was working with the third sector to carry these out. Mrs Forster Adams indicated that whilst the Trust was working with the third sector there was more work to do to improve performance in this area.

Mrs White asked about the reported increase in violent incidents. She also asked about the increase in the number of physical restraint incidents. Mrs Woffendin assured the Board that the increase in the number of violent incidents had been discussed at the Quality Committee and that this was due to a data reporting issue. With regard to the number of restraints, Mrs Woffendin explained that this was due to an increase in the acuity of specific service users. She agreed to circulate details of these matters to members of the Board.

CW

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

21/035

Sue Rumbold, newly appointed governor to the Council of Governors, sought further understanding of the data relating to safeguarding children, specifically the number of children who had been placed in care due to their parents suffering mental health issues. Mrs Woffendin reported that this information wasn't collected in that way and agreed to speak to Mrs Rumbold outside of the meeting.

CW

21/036

Safe staffing report (agenda item 13)

Mrs Woffendin presented the Safe Staffing Report. She advised that whilst there had been a number of significant staffing challenges there had been no breach of safe staffing levels in the months included in the report. She also paid tribute to the time and dedication of the staff involved in ensuring the right arrangements were in place to maintain the safety of wards.

Mrs Woffendin then outlined some of the actions being taken to mitigate the shortfalls in nurses, health support workers and Allied Health Professionals.

From an infection prevention perspective, Mrs Woffendin outlined the arrangements that were in place to test for, identify and contain any occurrences of COVID-19 infections and to effectively manage transmission rates.

The Board **received** the safe staffing report and **noted** the content.

21/037

Medical Director's Report (agenda item 13)

Dr Hosker presented the Medical Director's Report, noting that this focused on pharmacy services. He paid tribute to all the work that had been undertaken to respond to the pandemic from a medicine management perspective, including supporting the vaccination programme and interpreting and responding to the complex and changing national guidance around medicines during the pandemic. Dr Hosker then outlined the main areas of the report, including the workforce challenges presented by a national move to providing pharmacy services outside hospital settings.

Mrs White expressed some concern at the move to provide pharmacy services in primary care settings and suggested there could be an initiative to create joint posts. Dr Munro noted that this was a risk for not only this Trust but also for the acute Trust in Leeds. She suggested that this was something that should be picked up through the Leeds One-Workforce discussions. Miss Grantham suggested that this was also picked up within the Trust's Workforce Strategy.

Mrs White then asked about pharmacy apprenticeships. Dr Hosker indicated that he was unable to provide a detailed response on apprenticeships and agreed to circulate information to members of the Board outside of the Board meeting.

CHos

Prof Proctor thanked Dr Hosker for the report noting the difference the current Pharmacy leadership had made to the service. She also suggested that the Board receive an update on pharmacy at least annually so it was sighted on this important service. Dr Hosker agreed to look at this.

CHos

Mr Wright asked about the software used to look at expenditure on drugs. Dr Hosker noted that there was soon to be a Consultant Pharmacist appointed who would have oversight of expenditure on psychiatric medication as part of their remit. Prof Proctor suggested that at some point the Audit Committee receive a report on the expenditure relating to drugs year-on-year and to understand what the risks might be to supply.

CHos

The Board **received** the Medical Director's report and **noted** the content.

21/038

Guardian of safe working quarterly report (Q3) (agenda item 15)

Dr Hosker presented the Guardian of Safe-working Quarterly Report and gave a brief overview of the content. He advised that there had been 31 exception reports in the period, three of which had been identified as generating patient safety issues. However, he noted that further enquiries had found that this was a data reporting issue and that these had now been correctly classified. Dr Hosker also advised that the Junior Doctors' Forum had met in January 2021 and that no urgent concerns had been raised through that forum.

In summary he advised that exception reporting was now established in the

Trust and that work continued with the junior doctors and clinical supervisors to ensure there was a culture where exception reports were positively received and used as a mechanism to effect change.

Mrs White expressed some concern that one doctor had raised 16 exception reports. She also asked if there were any issues with medical staffing in relation to the Tier 4 CAMHS service which was being transferred to the Trust. With regard to the number of exception reports generated by one medic, Dr Hosker explained that this was being looked at by the Guardian of Safe Working to understand what the issues were and to ensure there were supportive arrangements in place where this was needed to address any of the issues.

With regard to the new CAMHS Tier 4 service, Dr Hosker noted that the Junior Doctors' Forum and the Trust's Director of Medical Education were receiving regular reports on the position relating to medical staffing and that they were looking at ways in which this might be addressed.

The Board **received** the assurance report and **noted** the content.

21/039

Staff survey results (agenda item 16)

Mrs Holmes presented the summary report on the outcome of the Staff Survey. She noted that the Board had received a report in a private session in February prior to the information being published. She outlined the key headlines and detailed some of the work that would be undertaken to address the findings, in particular the improvement work that would take place at a local level driven by individual teams.

Mrs Holmes reported that the Trust surveys not only its substantive staff but that it is the only Trust that surveys its bank staff noting that this demonstrates the value it places on this section of the workforce.

It was noted that Quality Health would be available to make a detailed presentation to the Board and it agreed that this would be annexed to a Workforce Committee meeting and that other members of the Board who did not attend that committee would be invited to attend that session.

CHoI / HG

It was also agreed that the Board would receive assurance through the Workforce Committee on the actions taking place to address the findings. It was agreed that this would be picked up at the April Workforce Committee meeting.

CHoI

Mr Wright suggested that the key themes from exit interviews should be reported through the Workforce Committee. It was agreed that this would be considered by Mrs Holmes.

CHoI

The Board **received** the outcome of the staff survey and **noted** the content.

21/040	<p>Report from the Chief Financial Officer (agenda item 16)</p> <p>Mrs Hanwell drew attention to a number of points in her report. She noted that the financial position was better than planned and that this was in the context of an overall improved position across the ICS.</p> <p>In terms of the planning process, Mrs Hanwell advised that the revised capital plan would be submitted on 12 April with a version of the Annual Plan being submitted soon after that on 6 May to the ICS. She added that these deadlines would allow further consideration of the forecast position for quarter one and beyond.</p> <p>Mrs Hanwell then spoke about the risks around capital plans and the capital allocation, noting that this would be allocated at an ICS level. She added that there would need to be some recalibration within the capital allocation available.</p> <p>Given the changes in the financial regime and the impact of the ICS, Mrs Hanwell agreed to give some thought to producing a guide to the new way of funding including the changes to the freedoms of foundation trusts and the principles against which it would work.</p>	DH
The Board received and noted the report from the Chief Financial Officer.		
21/041	<p>Board Assurance Framework (agenda item 17)</p> <p>Dr Munro presented the Board Assurance Framework noting that this had been discussed in detail at Board sub-committees.</p> <p>The Board received the Board Assurance Framework and noted the content.</p>	
21/042	<p>West Yorkshire and Harrogate Climate Change asks of partner organisations (agenda item 18)</p> <p>Dr Munro presented a paper that had been produced following a presentation to the West Yorkshire and Harrogate System Leadership Executive Group on 3 November 2020. She indicated that this recommended that the 'asks' in the paper be considered by every partner organisation's Board.</p> <p>She noted that ahead of the Board meeting a response had also been made to a baseline survey to indicate that the Trust had: an identified executive lead for sustainability (Dawn Hanwell); a NED champion (Sue White); and that it had an assessment and plan which was integrated with the Leeds system plan, brought together under the Health and Wellbeing Board for Leeds.</p>	

The Board supported the 'asks' as set out in the paper and acknowledged that sustainability was an important issue for the Trust. It noted that this was a matter for all staff not just sustainability champions and that it should be part of staff's normal working practices and considerations. It also acknowledged that a lot had been achieved particularly with the new ways of working brought about by the COVID-19 restrictions but that there was more that could be done to support the sustainability agenda.

The Board **considered** and **supported** the 'asks' relating to creating a greener NHS and also noted the responses already made to the baseline survey.

21/043

The organisation's commitment to joining together to form an Integrated Care Partnership (agenda item 19)

Dr Munro presented a paper which provided the Board with an update on the progress to date and the intended next steps to formally operate as an Integrated Care Partnership in Leeds and she detailed the key points for consideration.

Dr Munro explained that partners in Leeds had been working closely together for several years with established governance arrangements in place but that in light of the White Paper setting out the new regulations for the ICS, it was now seen as an opportune time to seek formal sign-up from the respective boards of the Leeds ICP and for this to form the 'place-based' arrangements for integration as the ICS moves to its new statutory footing.

The Board discussed the proposals for the framework of working together which were supported. Dr Munro thanked the Board for its comments which she agreed to feed into the discussions relating to the future development of the ICP.

The Board **considered** and **supported** in principle the recommended next steps relating to the establishment of the Leeds Integrated Care Partnership, noting that a number of comments had been provided by the Board which would be fed into the discussion by Dr Munro.

21/044

Review of Memorandum of Understanding (MoU) for the West Yorkshire Mental Health Learning Disability and Autism (WYMHDLA) Committees in Common and associated actions (agenda item 20.1)

The Board **considered** and **approved** the revised MoU for the WYMHDLA Committees in Common.

21/045

Report from the WYMHDLA Committees in Common meeting held 21 January 2021 (agenda 20.2)

The Board **received** and **noted** the content of the Chair's report from the WYMHLDA Committees in Common meeting.

21/046

The use of the seal (agenda item 21)

The was advised that the seal had been used for the following documents:

- Log 124 – Novation of Contract with Interserve Construction Ltd, and the transfer of rights and obligations for the construction of Red Kite View from Leeds Community Healthcare to LYPFT
- Log 125 – Transfer of car parking space at Seacroft Hospital to Leeds Community Healthcare.

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

21/047

Any other business (agenda item 22)

There were no items of other business.

21/048

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 11:55 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.