## LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST

### Minutes of the Public Meeting of the Board of Directors held on Thursday 26 January 2023 at 9:30 am. in Create@1, Horizon Leeds, 3rd Floor, 2 Brewery Wharf, Kendall Street, Leeds, LS10 1JR

**Board Members** 

Apologies

	Miss Merran McRae	Chair of the Trust
	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 (Senior Independent Director)
	Dr F Healey	Non-executive Director
	Dr C Hosker	Medical Director
	Mrs K Khan OBE	Non-executive Director
	Dr S Munro	Chief Executive
	Mr D Skinner	Director for People and Organisational Development
	Mrs C Woffendin	Director of Nursing, Quality and Professions
	Mr M Wright	Non-executive Director
	-	

All members of the Board have full voting rights

### In attendance

Mrs C Hill	Associate Director for Corporate Governance / Trust Board Secretary	
Miss K McMann	Head of Corporate Governance	
Mr K Betts	Governance Assistant	
Ms A Hirst	Involvement Facilitator in the Learning Disability Service (for minute 23/001)	
Ms H Thompson	Experience Co-ordinator (for minute 23/001	
Two members of the public observed the meeting (including one governor)		

### Action

Miss McRae opened the public meeting at 09.30 am and welcomed everyone.

## 23/001 Sharing Stories (agenda item 1)

Miss McRae welcomed Amy Hirst (Involvement Facilitator in the Learning Disability Service) and Helen Thompson (Experience Co-ordinator) noting they were going to update the Board on the Bigger Labels Project. Miss McRae reminded the Board that last year there had been a story shared about the difficulties people with learning disabilities can experience in relation to the size of labels on boxes of medication and noted this presentation provided an update on the project to raise awareness of the issues and risks this posed.

Ms Hirst explained that the project had been co-produced and led by a number of service users with a learning disability and had involved the Patient Experience Team and the Trust's Pharmacy Department.

Ms Hirst then shared a film which detailed people's experience and the steps that had been taken to raise awareness both in the Trust and in community pharmacies more widely. She noted that it was possible to print bigger labels but awareness of this was very low; it had been observed there was a resistance to change and work was ongoing to help change custom and practice. Ms Hirst also reported that the project had been presented at the Trust's Research Conference where it had won joint first prize.

Ms Thompson advised the Board that she was part of a Health Equities Fellowship with the ICS and as part of this there had been a literature review and report completed to develop a case for change this project. Ms Thompson then shared some of the things that had been learnt from the literature review.

Ms Thompson then outlined the next steps which included a continuation of the work with community pharmacists to share people's experience and raise awareness of the ability to print bigger labels. She also noted that work would extend to raising awareness nationally and that links had been made with the National Patient Safety Executive.

The Board discussed the work being carried out and fully supported the project. It suggested ways in which the barriers to providing bigger labels could be addressed locally and nationally.

The Board **thanked** Ms Hirst and Ms Thompson for updating the Board on the Bigger Labels Project and noted the importance of raising awareness locally and nationally to bring about change.

## **23/002** Apologies for absence (agenda item 2)

Apologies were received from Mr Cleveland Henry, Non-executive Director

23/003 Declaration of interests for directors and any declared conflicts of interest in respect of the agenda items (agenda item 3)

The Board noted there were no changes to Board members' declarations of interest and no member had declared a conflict of interest in any agenda item.

23/004 Memorandum of Understanding: division of duties between the Chair and Chief Executive (agenda item 4)

> Mrs Hill advised the Board that due to the Trust having a new Chair it was necessary for the Chair and Chief Executive to agree and sign a memorandum of understanding as to how they would work together and what their respective duties were.

> It was noted there was a reference in the introduction to the document to NHS Improvement and this should now refer to NHS England. Mrs Hill agreed to ensure this change was made before the document was uploaded to the website.

CHill

	The Board <b>received</b> the Memorandum of Understanding and was <b>assured</b> this had been signed by the Chair and Chief Executive and that they understood and had agreed their respective leadership duties.	
23/005	<b>Minutes of the previous meeting held on 24 November 2022</b> (agenda item 5)	
	It was noted that Mr Henry was now the Senior Independent Director, not Mr Wright, and this would be reflected correctly in the list of Board members.	CHill
	The minutes of the meeting held on 24 November 2022 were <b>received</b> and <b>agreed</b> as an accurate record subject the one amendment.	
23/006	Matters arising (agenda item 6)	
	There were no matters arising.	
23/007	Actions outstanding from the public meetings of the Board of Directors (agenda item 7)	
	Miss McRae 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.	
	Dr Munro agreed to circulate a paper that had been presented to the Integrated Care Board in relation to the national COVID-19 Inquiry which would provide further contextual detail and information about the steps being taken to progress this.	SM
	The Board <b>received</b> the cumulative action log and <b>noted</b> the content.	
23/008	Report from the Chief Executive (agenda item 8)	
	Dr Munro presented her Chief Executive's report and drew attention to the key information it contained. She firstly congratulated Miss McRae on being appointed as the Chair of the Trust by the Council of Governors at its meeting on 17 November 2022, noting this was the first Board meeting for Miss McRae as Chair.	
	With regard to the pressures faced by the Trust during the winter period, including the impact of ongoing industrial action in the city, Dr Munro paid tribute to the oversight arrangements in place within the Trust and the effective way it was monitoring any potential impact. She noted the Trust was not in incident mode but was keeping a close watching brief on any emerging situation or potential adverse impact.	
	1	

	Dr Munro then advised the Board that Mrs Woffendin had given formal notice to take early retirement at the end of May. She added there would be a Nominations Committee meeting later in the day to discuss the next steps in recruiting a replacement. Dr Munro also reported that at the last meeting of the West Yorkshire Mental Health Learning Disability and Autism Collaborative Committees in Common. a paper had been presented which set out responsibilities and accountabilities between organisations. Dr Munro explained that the Committees in Common had agreed that individual Boards would be given the opportunity to discuss and provide feedback on the arrangements and suggested this was looked at in more detail at the February Board Strategic Discussion session. Mrs Hill agreed to add this to the forward plan. Miss McRae noted the work of the Enhanced Coordination Group and asked for the Board's thanks to be formally noted and extended to members of the group and the staff who supported its work. Miss McRae also noted the announcement of the early retirement of Mrs Woffendin, adding there would be an opportunity for this to be more formally recognised in the coming weeks. With regard to the national Workforce Plan, Miss McRae asked it the Trust was able to contribute and comment on this. Dr Munro advised that a member of the workforce team was linked into this.	CHill CHill / JFA
23/009	<ul> <li>Report from the Chair of the Quality Committee for the meetings held on 6 December 2022 and 10 January 2023 (agenda item 9)</li> <li>The Board received the Chair's report from the Quality Committee meetings that had taken place on 6 December 2022 and 10 January 2023. Dr Healey drew attention to the two reports presented and highlighted a number of areas that had been discussed including:</li> <li>Quality improvement priorities, noting these would be discussed in more detail later in the private session of the Board meeting, and explained the rationale for bringing this item to the Board for further consideration</li> <li>The detailed safer staffing report, noting all the good work this had detailed particularly in regard to recruitment and retention. However, she noted that despite all that work there was still an issue both locally and nationally with staff vacancies and noted the suggestion from the committee that this was a strategic issue that the Board might want to look at in more detail in a dedicated discussion session.</li> </ul>	CHill

	The Board <b>received</b> the report from the Chair of the Quality Committee and <b>noted</b> the matters reported on.
23/010	Report from the Chair of the Workforce Committee for the meeting held on 12 December 2022 (agenda item 10)
	The Board received the Chair's report from the Workforce Committee meeting that had taken place on 12 December 2022.
	The Board <b>received</b> the report from the Chair of the Workforce Committee and <b>noted</b> the matters reported on.
23/011	Report from the Chair of the Audit Committee meeting held on 17 January 2023 (agenda item 11)
	The Board received the Chair's report from the Audit Committee meetings that had taken place on 17 January 2023. Attention was drawn in particular to:
	<ul> <li>The Quality Account, noting it had been agreed the respective roles the Audit Committee and the Quality Committee would take in terms of developing its content and assuring on the process by which it was developed.</li> <li>The audit of the Patient and Carer Experience and Involvement Strategy, adding that this had achieved 'High Assurance' and congratulated the team for their work in attaining this level of assurance. The Board asked for its thanks to the team to be formally recorded.</li> <li>Modern Slavery audit, noting that this audit had been rated as 'limited assurance', but the committee had been assured of the work in hand to address the recommendations. Mr Wright then drew attention to one area of discussion which had been highlighted by the audit which was that purchase orders should be used wherever possible as this allowed greater control over the suppliers used.</li> <li>The Health and Safety Report and the suggestion there was a definition of this to inform what goes into the report. Mr Wright explained this was to ensure there wasn't a duplication of work in relation to other areas and to ensure respective committees could focus on those areas pertinent to their duties.</li> </ul>
	Mr Wright also noted that a matter had been referred to the Workforce Committee in relation to secondary employment. Mr Wright added that this was a potential area of risk for fraud, which had been highlighted through the committee's Fraud Update Report, and it was felt this needed greater assurance in terms of the steps in place to allow staff to declare and record any secondary employment they might have. Mrs Hanwell then provided some context to this item, explaining the potential for the cost of living crisis to impact on staff needing more than one job. Mr Skinner acknowledged that staff having more than one job was a potential risk not only in terms of fraud, but also staff wellbeing. He agreed to look at whether discussing and recoding

secondary employment was something that could be added into the annual Wellbeing Assessment. The Board supported this being remitted to the Workforce Committee.

Miss McRae asked about the changes made to the Internal Audit Plan and asked if the deferral of audits would create any risks. Mr Wright advised the Board that the committee had been assured the audits would take place in the amended timescales. He also noted the plan for the coming financial year was being devised and that members of the Board would have the opportunity to review and comment on the plan to ensure it focused on the right areas.

With regard to potential overlaps in areas of reporting to the various Board sub-committees, and the need to ensure duplication of reporting and assurance seeking was managed, Miss McRae noted that this was something the Board might want to consider at some point. Dr Healey suggested that if reports need to go to multiple committees the content could be set out in such a way to allow those committees to focus easily on their areas of responsibility, without losing the flow and interconnectivity of the report itself.

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

# 23/012 Report from the Chair of the Finance and Performance Committee for the meeting held on 24 January 2023 (agenda item 12)

The Board received the Chair's report from the Finance and Performance Committee meeting that had taken place on 24 January 2023. Mr Wright presented the report on behalf of Mr Henry. He drew attention to:

- An update on key financial issues at month 7, and noted the significant challenge relating to 2023/24 planning, in particular the underlying pressures and agreement of plans which aligned to the operational planning priorities.
- An appendix to the Chief Financial Officer's report which detailed the changes to the structure of the workforce and the way in which the mix of staff was being adapted to meet the needs of the services.

Mr Wright then noted that the committee would receive the Red Kite View evaluation report on the development of the service and the establishment of a new build, adding the report would also include any wider learning from the Provider Collaborative partnership arrangements. Miss Grantham suggested an area of focus for the report should be the learning about the merger of two teams and the cultural issues that had been addressed.

With regard to the Children and Young People's Service, Dr Munro noted that for the first time there were no inappropriate Out of Area Placements for children in West Yorkshire, noting this was something to be commended. She added this was testament to the care pathway and the way in which people were being cared for, which was making a real difference. DS

Mr Wright then asked for it to be noted that Mr David Brewin (Deputy Director of Finance) would be leaving the Trust in February, and paid tribute to the work he had done over the years both for the Trust and more widely in the ICS. The Board asked for its thanks to be formally recorded.

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

# **23/013** Report from the Chief Operating Officer (agenda item 13)

Mrs Forster Adams presented her Chief Operating Officer's report, noting this had been scrutinised by the Finance and Performance Committee. She then drew attention to the key points in the report.

Mrs Forster Adams spoke about the focus around key workforce challenges and the work to respond to this; making links to the information in the Safer Staffing Report. She noted the Board had agreed to look at this in more detail, however, she assured the Board that stress testing and scenario planning around workforce had been undertaken as part of the overarching Business Continuity work, but that within some individual services there had been a more reactive approach to workforce issues rather than taking a planned approach. Mrs Forster Adams agreed to reflect on this as part of that wider thinking about strategic workforce issues.

With regard to Adult Community Mental Health Services, Mrs Forster Adams noted this service had been in Business Continuity since November 2021. She added that over the last year there had been reports on the mitigations in place to ensure a safe and effective service. However, she noted this had not resulted in the stabilisation of the service and that the executive directors were working with the senior staff in the service to look in greater detail at what can be done and also look at the progress with community transformation. She then outlined some of the short-term and medium-term plans to support moving out of Business Continuity.

With regard to the Forensic Service, Mrs Forster Adams reported the issues around medical staffing. She added that it had been agreed with provider collaborative partners to temporarily suspend admissions to the service until there had been a solution to medical provision, which she noted was being explored with partners across West Yorkshire.

Mrs Forster Adams added that another area of concern in relation to medical staffing was at Red Kite View and that again, in agreement with partners capacity had been temporarily reduced to 76% from a target of 85%. She assured the Board this had been looked at in detail in the Finance and Performance Committee and that solutions were being explored at pace and a report would be made back to partners with the next steps.

Mrs Khan noted the challenges within the CONNECT Eating Disorders Service as set out in the report, but reported that she had received some very positive feedback from a family about the service and how they had been supported. Miss McRae asked if the steps for assessing Business Continuity was a dynamic process. Mrs Forster Adams explained that it was an ongoing and iterative process and that she would be reviewing each of the services with executive colleagues through the Executive Performance and Oversight Group to assess if services should remain in Business Continuity.

Miss McRae also asked about Community and Intensive Home Treatment team case-loads and the work to understand why the Trust was seeing more people in crisis. She sought clarity on whether this was a specific project with timescales. Mrs Forster Adams assured the Board this was the case and that it would be possible to report back on the outcome at the May Board meeting.

JFA

The Board **received** and **noted** the detail in the Chief Operating Officer's report.

## **23/014** Chief Financial Officer's Report (agenda item 14)

Mrs Hanwell presented her Chief Financial Officer's Report noting the Trust was achieving both capital and revenue plans as at month 9 in 2022/23 and there was a high degree of confidence in forecast outturn delivery against these plans overall.

With regard to capital spend, in particular the development of the Trust's new headquarters site, Mrs Hanwell advised the Board that whilst there had been some delays in getting the work underway it was expected this would be completed by the end of April 2023.

Mrs Hanwell then reported on the financial plans for 2023/24, noting this presented a more significant challenge than for 2022/23. She added there were a number of underlying pressures and the agreement of plans, which align to the operational planning priorities, would be in the more complex context of the operation of the first year of the statutory ICB.

She then advised the Board of some of the headlines for the coming financial year, including a budgeted efficiency challenge which was expected to be around 4%, adding there was work to do to identify how this would be achieved.

With regard to the timetable for the submission of the 2023/24 financial plans, Mrs Hanwell noted there would need to be a fuller discussion at the March Board meeting before the plan is submitted.

The Board then discussed productivity and how this was defined and measured, noting this was more difficult to do in the context of mental health care. Dr Munro advised of the discussions that were taking place across the ICS to ensure there was a joint understanding of levers; allocation efficiency (how is the money best allocated across organisations); and technical efficiency (how is the money best used once it is received).

DH

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

# **23/015** Six-monthly Safer Staffing Report (agenda item 15)

Mrs Woffendin presented the six-monthly safer staffing report and highlighted some of the key points. Mrs Woffendin noted the report covered a six-month period from 1 May to the 31 October 2022. She added there had been 12 breaches in that period and the Board had received updates on all these through the regular two-monthly report. She assured the Board that whilst there had been no patient safety issues linked to the breaches, the paper provided triangulated information linking staffing with wider intelligence, through the safety lenses of medication, pressure ulcers, slips trips and falls and incidents of violence and aggression.

With regard to Part B of the report, Mrs Woffendin reported that this contained information on the capacity in the Community Mental Health Teams (CMHT) during the same period, noting this had been requested by the Board. She added that whilst there was no mandate from the National Quality Board to report on this, oversight around our community staffing arrangements was a requirement in terms of flow, safety, quality and patient experience.

The Board thanked Mrs Woffendin for the report, noting this provided a good level of information. Miss McRae asked about the issues with the Electronic Patient Records system not linking documents together and whether this was being actively addressed. Mrs Hanwell noted that this was a broader issue than just the CMHT Team, but the Digital Transformation Team would be supporting that CMHT team to look at what steps need to be taken to manage patient care records ahead of wider system changes taking place.

The Board **received** the six-monthly safer staffing report and **noted** the content.

**22/016** Use of the Trust seal (agenda item 16)

The Board **noted** the seal had not been used since the last meeting.

**23/017 Any other business** (agenda item 17)

There were no items of other business.

# 23/018 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 12:00 and thanked members of the Board and members of the public for attending.

The Chair then resolved that members of the public would 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.