

**Minutes of the Public Meeting of the Council of Governors  
held on Thursday 2 February 2023 at 1pm in the Create@2 Room at  
Horizon Leeds, 2 Brewery Wharf, Kendall Street, Leeds, LS10 1JR**

**PRESENT:**

Merran McRae – Chair of the Trust (Chair of the meeting)

**Public Governors**

Oliver Beckett  
Les France  
Ivan Nip

**Staff Governors**

Ian Andrews  
Gail Harrison  
Andrew Johnson

**Service User Governors**

Rachel Gibala  
Joseph Riach

**Appointed Governors**

Cllr Claire Douglas  
Matthew Knight  
Gabriella Obeng Nyarko  
Tina Turnbull  
Cllr Fiona Venner

**Executive Directors**

Joanna Forster Adams  
Dawn Hanwell  
Dr Chris Hosker  
Dr Sara Munro  
Darren Skinner  
Cathy Woffendin

**Non-Executive Directors**

Dr Frances Healey  
Cleveland Henry  
Martin Wright

**IN ATTENDANCE:**

Kieran Betts – Corporate Governance Assistant  
Rose Cooper – Corporate Governance Officer  
Matthew Gaskell – Consultant Psychologist and Clinical Lead for the NHS Northern Gambling Service (agenda item 2)  
Cath Hill – Associate Director for Corporate Governance  
Naomi Makin – Head of Sustainability (agenda item 11)  
Kerry McMann – Head of Corporate Governance

**23/001 Welcome and introductions** (agenda item 1)

Merran McRae opened the meeting at 1pm and welcomed everyone.

**23/002 Sharing Stories: Introduction to the Northern Gambling Service and its use of outcome measures** (agenda item 2)

Matthew Gaskell introduced the NHS Northern Gambling Service (NGS) and talked about how they use outcome measures for the benefit of patients and service development and to measure quality. He explained that they measure gambling outcomes pre and post treatment and at regular intervals for up to 12 months. They also do the same for outcomes relating to psychological wellbeing, depression, anxiety, work and social adjustment. The service also offers support for families and measures the impact of this. Matthew also shared some qualitative feedback from service users about their experience of accessing the NGS which between January and December 2022 had either been very good (87%) or good (13%). Matthew also highlighted the ongoing work to create and influence change at a policy and population health level.

Matthew provided some background to the NGS which received between 500 and 600 referrals a year and explained that people could be referred to the service in a variety of ways including self-referral. He advised that the waiting list was around four weeks, but that people received interim contact during that time. He also talked about the types of therapy used which was predominantly Cognitive Behavioural Therapy which could either be done on an individual basis or as part of a group.

Fiona Venner asked if the NGS provided support for children and Matthew explained that it was an adult service but agreed with Fiona's concerns about children being exposed to gambling from a young age and he explained that their work in this area focused mainly on the government and prevention. Fiona also shared some concerns about the funding sports companies receive from the gambling industry to advertise at matches. Matthew talked about the public's changing view of gambling sponsorships and highlighted the important work taking place at a policy level and their efforts in terms of lobbying the government.

Gail Harrison asked if the Trust's own systems enabled such effective measuring of outcome measures and Matthew responded that they had developed a separate system at NGS which allowed them to closely track the outcomes data. Dr Hosker advised that this was the 'gold standard' in terms of measuring service user outcomes and explained that the Trust's Care Director system was being developed so that it had similar capabilities to the system that NGS used. The Council noted that there was more work to do in terms of embedding the use of clinical outcome measures in other services.

Tina Turnbull asked about the co-production of outcomes and how important the role of charities such as Step Change Debt Charity and Citizens Advice were to improving outcomes further. Matthew responded that it was essential for service users to access financial support at the same time as addressing their gambling

problem, and they would signpost to these charities if that support was needed. He explained that the NGS provided an initial financial assessment for service users and offered advice but currently did not measure if any debt had been cleared.

The Council was very assured regarding the systems and processes used to track and measure outcomes, in particular the way data could be shared directly with service users and their families in a visual way to reflect their journey of recovery. It was agreed that Matthew Gaskell would come back to the Council to share an update in a year's time.

RC

The Council **thanked** Matthew Gaskell for his presentation and **noted** the information provided.

**23/003 Apologies** (agenda item 3)

Apologies were received from the following governors:

Caroline Bentham (Carer Governor), Mark Clayton (Carer Governor), Alex Cowman (Non-clinical Staff Governor), Rita Dawson (Service User Governor), Oliver Hanson (Clinical Staff Governor), Peter Holmes (Service User Governor), Kirsty Lee (Public Governor), John Manson (Service User Governor), Sayma Mirza (Appointed Governor), Rebecca Mitchell (Public Governor) and Bryan Ronoh (Carer Governor).

The meeting was not quorate.

Apologies were received from the following Board members: Helen Grantham, Non-executive Director and Kaneez Khan, Non-executive Director.

**23/004 Changes to any declaration of interests and declaration of any conflicts of interest in respect of agenda items** (agenda item 4)

No governor indicated a change to their declared interests or declared any conflict of interest in respect of agenda items.

**23/005 Minutes of the public Council of Governors' meeting held on the 1 November 2022** (agenda item 5.1)

The minutes of the public Council of Governors' meeting that was held on the 1 November 2022 were **approved** as a true record.

**23/006 Matters arising** (agenda item 6)

There were no matters arising.

**23/007 Cumulative action log – actions outstanding from previous public meetings**  
(agenda item 7)

Merran McRae presented the cumulative action log, and the Council agreed the actions reported as complete. Dr Hosker provided an update on action 22/053 which related to the clinical outcomes work. He advised that work was continuing as per the 90-day learning cycles with the fourth cohort due to conclude in one month. He noted that the latest cohort included the Learning Disability Respite Service which was looking at how to measure outcomes in a similar way to the NGS.

The Council **received** the cumulative action log and **noted** the updates provided.

**23/008 Chair's Report** (agenda item 8)

Merran McRae presented the Chair's Report and highlighted a few key areas for the Council to note. Firstly, Merran welcomed Gabriella Obeng Nyarko as this was her first meeting as an appointed governor on the Council. Merran also noted that in January the latest round of governor elections had begun, and that Mark Clayton and Peter Holmes were both eligible to stand for a second term. Merran also advised the Council that David O'Brien had stepped down as a governor with effect from 13 January 2023 and she thanked him for his contribution during his time on the Council and wished him the best for the future.

The Council noted that, due to the Part A meeting not being quorate, any decisions would need to be emailed out to governors for endorsement. On the issue of quoracy, Fiona Venner asked that in future communication was had with governors about any meetings they could not attend in advance of the dates being finalised.

**RC**  
**CGT**

The Council **noted** the report from the Chair of the Trust.

**23/009 Chief Executive Report** (agenda item 9)

Sara Munro provided a verbal report and described the enhanced arrangements the Trust had put in place to ensure services were safely staffed over the challenging winter period. Sara also advised the Council that the planning guidance for 2023/24 had been published by NHS England and services were currently undergoing a review of their priorities for delivery against the Long Term Plan and identifying efficiencies where possible. Sara also referred to the ongoing work to stabilise the Community Mental Health Service by addressing the workforce challenges through the community transformation project, new partnership arrangements with the voluntary and community sector, and mobilising direct support from staff across other services over the coming months. Sara also noted that Cathy Woffendin was

taking early retirement and that interviews for the new Director of Nursing were due to take place on the 29 March 2023 and governors would be invited to take part in the stakeholder panel.

The Council then received an update on the recent industrial action and Ivan Nip asked for more information about the impact to services and patients, as well as further assurance on how this was being managed, and any financial impact to the Trust. Sara explained that the dispute over the national pay award was with the government and not the Trust and explained that any increase in pay would be funded centrally. Joanna Forster Adams explained that so far there had been no direct impact on our services because no trade union organisation had achieved a mandate to strike within the Trust, but there was an ongoing risk that services would be indirectly impacted by the industrial action taken by regional partners. The Council noted that robust internal arrangements were in place to mitigate against the impact of industrial action within the sector.

Darren Skinner then gave an update on the current strike ballots which involved junior doctors and dieticians, and an upcoming ballot which involved consultants. He noted that the Trust had good industrial relations and met regularly with the trade union representatives and advised that preparatory work was taking place to assess and mitigate any risks to the Trust associated with future strike action.

The Council **received** the report from the Chief Executive and **noted** the updates provided.

#### **23/010 Quarterly Quality and Performance Update Report (agenda item 12)**

The Council received the report which outlined the Trust's performance as of October 2022. Firstly, Joanna Forster Adams outlined some hot spot areas in terms of service delivery for the Council to note. These included workforce challenges in the Forensic Service and Older Adults Inpatient Service and she described their approach to stabilising these services. She also highlighted the improvement in crisis face to face activity (since the publication of this report) and the improved responsiveness of the Acute Liaison Psychiatry Service.

Claire Douglas noted the increase in the number of bed days out of area and asked what had caused this and what the financial impact was. Joanna responded that they had seen high levels of occupancy and delayed transfers of care in acute services for a sustained period. She explained that people were presenting with higher acuity and therefore required longer episodes of care. In response to this they had commissioned some acute beds at the Middleton St George Hospital in Darlington using winter funding in order to consolidate out of area activity and improve quality in-reach. She reassured the Council this was a short-term stabilising measure, with minimal financial implications. Joanna offered to provide a further update on the Trust's use of out of area placements at a future meeting, including current improvement plans such as the Acute Care Excellence Programme. Tina Turnbull added that personal circumstances linked to finances and the rising cost of living were also impacting on service demand, as well as winter pressures. Joanna

**JFA**

agreed with this and noted the important work to reduce health inequalities across communities in Leeds.

Ian Andrews noted there was no non-clinical workforce data included in this report. Mr Skinner explained that it was a complex process to fully integrate this information into the report, but they were working on this. As an interim solution ahead of the data being fully integrated into the performance dashboard, it was agreed that this information would be provided as a separate appendix for future reports.

**DS**

Cleveland Henry also encouraged governors to observe the Finance and Performance Committee to hear more detail on performance matters. Ivan Nip queried why governors did not receive the full paperwork in advance of observing Board sub-committees and the Corporate Governance Team agreed to take this away for further consideration.

**CGT**

The Council **noted** the Quarterly Quality and Performance Update Report.

#### **23/011 Finance update** (agenda item 15)

Dawn Hanwell provided a verbal update on the Trust's current financial performance and outlined some of the factors influencing this position, including the current workforce challenges which were creating some underspend and the cost pressures impacting on overspend. She reminded governors that the Trust had a statutory duty to function collectively within the allocated resources across all NHS organisations in West Yorkshire. She noted that the Trust was required to make a £1.1 million surplus this financial year and confirmed that it was on target to achieve this. She explained that the system was required to break-even each year and outlined some of the challenges associated with this. She noted that planning was ongoing for a break-even position next year and that the financial plan for 2023/24 was due to go to the Board of Directors in March 2023.

The Council **noted** the finance update and **considered** the key points raised.

#### **23/012 Lead Governor Report** (agenda item 10)

Les France welcomed Merran McRae as this was her first Council of Governors' meeting as Chair of the Trust and thanked all governors involved in her recruitment. Les noted that this Council meeting was not quorate and informed the governors that Merran and the Corporate Governance Team were currently reviewing how the quoracy of meetings would be measured in the future. He also referred to the NHS Providers Governor Focus Conference which was a face-to-face event being held on 23 May 2023 which he and one other governor were booked on to attend.

The Council **received** the report from the Lead Governor.

### **23/013 Introduction from the Head of Sustainability (agenda item 11)**

Naomi Makin introduced herself to the Council as the Trust's Head of Sustainability. She explained that part of her role was to deliver the Green Plan which was divided into nine key themes including food and nutrition, sustainable models of care, medicines, and adaptation. She explained that she was working towards embedding sustainability across the organisation and supporting the Trust to consider sustainability when doing new projects such as service transformation. Naomi informed the Council that the NHS had a target of reaching 'net zero' carbon emissions by 2040, which she described as challenging, but reassured governors they were working hard to progress this. Naomi also noted that by the end of 2023/24 the Trust was required to have a Decarbonisation Plan, but she highlighted the significant financial gap in terms of decarbonising the NHS at a government level.

Fiona Venner asked if there had been any consideration to moving inpatients to a plant-based diet. Naomi responded that they were in dialogue with dieticians and were offering more plant-based options but completely removing certain food groups was not currently being considered as they want to offer as much choice as possible and avoid being prescriptive about what food people eat. Fiona also talked about the importance of adaptation to be ready for the impacts of climate change such as flooding and extreme temperatures. The Council noted that the Finance and Performance Committee received updates on issues such as this as well as wider updates on the delivery of the Green Plan.

Ivan Nip asked if the Trust had any money ringfenced for the 'green' agenda and Naomi explained she was currently undergoing a strategic review of the Green Plan to create milestones of what needed to be achieved by when and quantify what funds were required to deliver this. Merran suggested involving the governors in this review, and Naomi agreed to link with the Corporate Governance Team to discuss the best way to do this.

**CGT**

Claire Douglas asked what sustainability looked like in terms of medicines. Naomi explained that it was more of a challenge with mental health trusts than acute trusts, but a key element of this was looking at alternatives to medicine, such as green health and social prescribing. Gail Harrison then asked how Naomi's work would integrate sustainability with evidence-based practice to help clinicians to change their prescribing habits. Naomi responded that more focus was needed on developing sustainable models of care in the Trust but was pleased to note that she had received interest from clinicians who wanted to be involved in this workstream and she was hoping to recruit a Clinical Lead for Sustainability who would lead on this. Tina Turnbull provided some examples of where 'green' care was happening within the Leeds system such as the health inequalities work being coordinated through Forum Central. Naomi also referenced the unused woodland owned by the Trust that could be used for green social prescribing events and to help offset the Trust's carbon emissions.

Ian Andrews asked if Naomi was linked in with the NHS procurement sector, and Naomi responded that she had been involved in some events looking at social value

in procurement. The Council also discussed supporting staff with sustainability and Naomi referred to the new Staff Sustainability Network which was designed to support staff to be sustainable in their own lives.

The Council **received** the verbal update and **thanked** Naomi for meeting with the governors today.

#### **23/014 Report from the Chair of the Quality Committee (agenda item 13)**

Dr Frances Healey provided a summary of the key activities and priorities of the Quality Committee over the last year.

The Council **noted** this report for information and assurance.

#### **23/015 Report from the Chair of the Mental Health Legislation Committee (agenda item 14)**

Merran McRae provided a summary of the key activities and priorities of the Mental Health Legislation Committee over the last year and noted that Kaneez Khan had taken over as Chair of the Committee. She then asked if governors had any questions on the report and Fiona Venner asked if there had been any shift in the Trust's own statistics in terms of the disproportionate access and outcomes for black and other minority ethnic groups. Merran responded that there had not been a significant change but emphasised the importance of making sure the outcomes were the same for people regardless of their background and circumstances and the importance of having access to data that would help to identify areas for improvement.

Ivan Nip noted the use of advocacy services and the good working relationship between our services and the police and asked if this was the same for people with mental health issues in prison. Sara responded that the Trust offered direct support into police control rooms but explained that prison healthcare as a whole was commissioned separately to the NHS, unless the people requiring support were under our services in which case they would come into the Trust's forensic mental health pathway.

Gail Harrison referred to the proposed changes to the Mental Health Act reforms and asked whether the Trust had input into this and if it could enact any of the recommendations early. Sara Munro confirmed that the Trust had submitted responses to the consultations thus far and advised that some of the recommendations had already been acted on, for example Joanna Forster Adams had been named as the executive lead for health inequalities. The Council noted that Sharon Prince, Consultant Clinical Psychologist, was linked into the health inequalities work and was scheduled to provide an update on the Synergi Collaborative at a future Mental Health Legislation Committee.



The Council **noted** this report for information and assurance.

**23/016 The Trust's Key Strategic Risks** (agenda item 16)

Cath Hill introduced the paper which advised the Council of the key strategic risks as reported through the Board Assurance Framework (BAF). She explained that the BAF was a document received by the Board and its sub-committees so they could be assured these risks were being effectively controlled. She added that work had been done recently to review and refine all the strategic risks and the risk scores and these had been used to populate the refreshed BAF.

The Council was **assured** that the Board of Directors had agreed the strategic risks and the risks were monitored by the Board and its sub-committees to ensure these were being effectively controlled and mitigated.

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

As this was Andy Johnson's last Council meeting having served three full terms, on behalf of Les France and the rest of the governors, Merran McRae thanked Andy for actively participating in the work of the Council, regularly observing Board and sub-committee meetings and attending service visits, and noted that his contributions over the last nine years had been very much valued.

The Council **thanked** Andy Johnson and wished him the very best for the future.

The Chair of the meeting closed the public meeting of the Council of Governors of Leeds and York Partnership NHS Foundation Trust at 3.45pm. She thanked governors and members of the public for their attendance.