

LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST

**Minutes of the Public Meeting of the Board of Directors  
held on Thursday 27 July 2023 at 9.30 am  
in Inspire@ room, Horizon Leeds, 3rd Floor, 2 Brewery Wharf, Kendall Street, Leeds,  
LS10 1JR**

**Board Members**

Apologies

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

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
Mr O Tipper	Head of Communications
Ms J Robinson	WRAP Lived Experience Facilitator (for minute 23/072)
Mr S Burton	Head of Recovery College (for minute 23/072)
Ms S Gibbons	Assistant Psychologist (for minute 23/072)
Mrs R Pilling	Carer Coordinator, Patient and Carer Experience Team (for minute 23/072)

**Action**

23/072

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

**Sharing stories – the Recovery College Wellness Recovery Action Plan (WRAP) Course** (agenda item 1)

Miss McRae welcomed Ms Robinson, Mr Burton and Ms Gibbons to the meeting, noting they were attending to talk about a course run by the Recovery College, which was the Wellness Recovery Action Plan (WRAP).

Ms Robinson first shared her story and her experience of being unwell. She explained how her mental ill-health had impacted her life and told the Board of the important role the Leeds Recovery College and the WRAP course had played in her recovery. She spoke about how the WRAP had helped her to understand herself, her illness and also the role the WRAP had played in identifying when she was becoming unwell. Ms Robinson then explained how

she had used her own experience to become a WRAP Lived Experience Facilitator, and how she was able to help and support other people in developing their own WRAP.

Ms Gibbons then spoke about the facilitation of the course, noting this had been all the more powerful having people involved who have lived experience of the WRAP course. Mr Burton then outlined the role and function of the Recovery College and the way in which courses were delivered. With regard to WRAP he explained this was one of the core courses which was attended by not only service users, but also staff, and how the WRAP focused on self-compassion and was used to support mental wellness more widely.

Ms Khan noted the difficulty some people have in talking about mental health and therefore asked about the referral route. It was noted the route was through self-referral which was accessed through the Recovery College website. Ms Khan commented this was a really useful service which would benefit many people. The Board supported the WRAP being used by both staff and service users and the need to ensure this was embedded and at the forefront of the delivery of services to our patients.

In response to a question about what the Board could do to help support the delivery of the programme, Mr Burton highlighted some of the practical difficulties experienced by the service in terms of premises in which to deliver courses and also the need for a simple booking process to allow easy access to courses.

The Board suggested the Recovery College should be added to the list of service visits.

CHill / RC

The Board **thanked** Ms Robinson, Mr Burton and Ms Gibbons for attending the Board and raising awareness of the WRAP course and the important impact this had on the wellbeing of service users and also staff.

**23/073**      **Apologies for absence** (agenda item 2)

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

**23/074**      **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.

**23/075**      **Minutes of the previous meeting held on 25 May 2023** (agenda item 4)

It was noted that Ms Khan's title had been incorrectly recorded. Mrs Hill agreed to amend this.

The minutes of the meeting held on 25 May 2023 were **received** and **agreed** as an accurate record, subject to a change in Ms Khan's title

**23/076 Minutes of the previous extraordinary meeting held on 22 June 2023** (agenda item 4)

It was noted the start time for the extraordinary meeting had been incorrectly recorded as 13:30 and should have been 15:30. Mrs Hill agreed to amend this.

The minutes of the meeting held on 22 June 2023 were **received** and **agreed** as an accurate record, subject to a change in the recording of the start time.

**23/077 Matters arising** (agenda item 5)

There were no matters arising.

**23/078 Actions outstanding from the public meetings of the Board of Directors** (agenda item 6)

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.

The Board **received** the cumulative action log and **noted** the content.

**23/079 Annual Responsible Officer and Medical Revalidation report** (agenda item 13)

Dr Neil presented the Annual Responsible Officer and Medical Revalidation report. She noted this set out the key requirements for compliance with regulations and key national guidance and that it provided a review of how these requirements were being met, and also provided assurance on compliance and details of what improvements were being made over time.

Dr Neil then spoke about the report in some detail. In particular she noted that: all doctors had received an appraisal and were revalidated; and a peer review had been undertaken with South West Yorkshire NHS Foundation Trust which had concluded the Trust's Appraisal and Revalidation Team had robust processes in place, and were able to manage the workload. She also noted there had been a review of remuneration for the doctors who carried out appraisals, recognising the extra work this created and that remuneration was not in line with the amount paid by other organisations, adding this needed more consideration. Finally, she suggested the policy for managing concerns needed to be revisited to ensure the steps taken were proportionate.

The Board discussed the report. It talked about the appraisal process to better understand how these were carried out and noted the importance of ensuring conversations were meaningful to the doctors. The Board also sought to understand how the appraisal process linked to supervision, noting both these link through to doctors being registered to practice. However, it was noted the Trust's overall appraisal and supervision metrics do not include doctors, due to medical appraisal and supervision having a statutory standing.

Mr Skinner welcomed the suggestion that the policy for managing concerns was reviewed and agreed to pick this up with Dr Neil outside the meeting.

**DS / WN**

The Board **received** the Annual Responsible Officer and Medical Revalidation report. It **agreed** this provided sufficient assurance of compliance with regulations and key national guidance and **agreed** this should be signed by the Chair of the Trust.

**23/080**

### **Report from the Chief Executive (agenda item 7)**

Dr Munro presented her Chief Executive's Report to the Board. She drew attention to the work that had been ongoing to ensure services were safely managed during periods of industrial action. She added that there had been a recent announcement about the dates of the forthcoming Junior Doctors' strike in August, noting this would then be followed by industrial action by consultants.

Dr Munro referenced the improved position in relation to performance within the Community Mental Health Teams, noting this would be looked at in more detail in the Executive Performance and Oversight Group. She drew attention to the reduction in case-loads and the data which showed there was now a response to referrals in less than two weeks.

With regard to the NHS Workforce Plan, Dr Munro noted this had been launched on the 30 June and a more detailed briefing would be brought to the September Board meeting, which would include an assessment of what this meant for the Trust's People Plan and shared workforce actions in the Leeds Health and Care Academy.

**DS**

Dr Munro also referenced the report by Dr Geraldine Strathdee in respect of mental health inpatient care, noting a briefing paper on this would be provided at the September Board meeting.

**NS**

Dr Munro then referenced the celebrations in respect of NHS75, noting that at the highly successful Annual Members' Day there had been a number of presentations made by service users, carers and staff detailing how the NHS had made a difference to them. She highlighted the huge amount of work that had been undertaken to make the day a success and formally thanked the Communications Team, the Patient Experience Team, the Corporate Governance Team, the Andrew Sims Centre and the service users who had been involved in the project management of the day.

Mr Wright referenced the ICB operating model and the need to make 30% savings, and asked when more details would be released in relation to this and whether it would have any impact on the Trust. Dr Munro explained that ahead of the review of costs in the ICB, those staff who carried out work directly for the Trust and its partners had already transferred into the Trust, and as such would not be part of that review. Dr Munro indicated that no further details had been released about the operating model and as such any potential impact was as yet unknown but it was being kept under review.

With regard to a question about pay awards, Mr Skinner explained the process by which Pay Review Bodies assess and make recommendations on the level of awards. He then explained the process by which the unions consider the offer. Mrs Hanwell then explained the funding implications for pay awards, and the potential impact this may have on the Trust's budgets, noting the government would indicate if it would fully or partially fund any award.

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

23/081

**2023/24 Organisational Priorities – quarter 1 progress report** (agenda item 8)

Mrs Hanwell presented the quarter 1 progress report in respect of the Trust's key priorities. She noted this report had been discussed by the Executive Directors where it was recognised there needed to be further work to pull out the thematic interdependencies.

Dr Munro then explained it had been agreed the Senior Management Team would review the priorities on a regular basis, which would allow further analysis of the information on progress against the priorities and better triangulation with other metrics.

The Board discussed the report, including the format. In particular it noted that whilst the report needed to include an update on all the agreed priorities, a focus on those that were rated red and a summary of the key successes might provide a more succinct report for the purpose of assuring the Board.

It was noted this report should be shared with the governors and Miss McRae agreed to look at how this could be done, taking account of the timing of the Council of Governors' meetings through the year.

**MM**

With regard to the recruitment to the Rough Sleepers team, Mrs Forster Adams referenced the recent successful recruitment campaign, noting that four new members of staff were in the process of being offered positions.

Miss McRae asked about the Autism and ADHD service, noting there were two business cases setting out a series of options for the delivery of these services and how it might be improved. Mrs Hanwell explained that to date both business cases had not been approved due to the significant funding required and that alternative options were being explored to ensure there was a properly commissioned service.

The Board **received** and **discussed** the Quarter 1 report on progress against the Trust's organisational priorities.

23/082

### **Report from the Chief Operating Officer** (agenda item 9)

Mrs Forster Adams presented her Chief Operating Officer's report. She framed the report in the context of there being increased collaboration across the service lines to address some of the common themes identified within the report. In particular she referenced the community stabilisation plan which was resulting in positive outcomes; addressing the impact of any disruption caused by industrial action; and the inpatient flow oversight group and its work to bring together service lines to look at how issues can be addressed.

She then spoke about the significant risks and challenges faced by services which were: workforce supply in those areas where there were material vacancies in core services; sustained demand in core mental health services and also more specialist services; the ongoing disruption as a result of the impact of industrial action and incidents; and waiting times for the Neurodiverse and the Gender services.

With regard to the Multi Agency Discharge (MADE) Event, Mrs Forster Adams noted this had been very well supported across the health and social care sector in Leeds, adding this work would feed into the inpatient flow and Out of Area Placements work.

With regard to the Supported Living Service, Mrs Forster Adams drew attention to there being several vacancies in that service, noting this had resulted in a significant contract income shortfall since the move to individualised funding. She added the Trust was currently liaising with the Leeds ICB and Leeds City Council to agree how this shortfall would be address as a health and care system.

The Board received and considered the Chief Operating Officer's report

Miss Grantham asked about the MADE event and where the outputs from this would be reported. Mrs Forster Adams explained this work was predominantly focussed around the flow of patients in and out of the acute trust, and the impact this had across the wider system. She added that using a common methodology had provided a better understanding of the impact on mental health services, which then helped inform some of the internal issues for the Trust and provide a platform to find sustainable solutions.

Miss McRae noted there was an outcome report on Red Kite View. Mrs Forster Adams explained there were a number of strands to this report and asked for guidance on which Board committee this should be reported through. It was agreed that given the report's cross cutting themes it would go to a Board Strategic Discussion session. Mrs Hill agreed to add this to the forward plan.

Mr Wright asked about inpatient acute service bed capacity and whether there needed to be a review of the number of beds needed to deliver the service.

**CHill**

Mrs Forster Adams advised that bed capacity had been modelled as part of the work to develop the Care Services Strategic Plan, and this had concluded the number of beds was at the right level. However, she observed that bed occupancy would fluctuate, and this would, from time-to-time result in Out of Area Placements (OAPs). She added that whilst the last round of bed modelling had indicated there was the right number of beds, this continued to be kept under review along with the impact the wider health and social care sector had on occupancy, flow and OAPs, and the development of the community service offer to allow people to be treated outside of an inpatient setting.

Mr Wright then asked if there was the right balance of gender specific beds. Mrs Forster Adams explained it was more of a challenge to get the balance right and explained some of the factors that feature in deciding if an OAP is made.

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

23/083

### **Chief Financial Officer's Report (agenda item 10)**

Mrs Hanwell presented her Chief Financial Officer's report regarding the financial position as at month 3. She reported that the Trust's financial performance had further deteriorated in-month with a c£200k deficit. She added that whilst the focus needed to be on reducing key areas of expenditure within the Trust, the position also needed to be taken in consideration of the wider system's financial challenge, noting this could further impact on the Trust's efficiency target. To manage the emerging financial position, Mrs Hanwell assured the Board that enhanced financial governance controls were now in place across the system.

With regard to capital, Mrs Hanwell drew attention to a possible opportunity linked to the Perinatal Provider Collaborative in regard to additional inpatient capacity. She noted the scoping work was progressing at risk because the Trust was not the chosen provider, she explained the rationale for this was that the Trust had expressed an interest in providing this facility. She then explained that NHS England would, in due course, confirm which provider would take this scheme forward and the initial scoping work had been undertaken with that in mind.

Mrs Hanwell then reported the Commercial Procurement Collaborative Limited Liability Partnership (CPP LLP) would be formally closing down as an entity. She explained this was required following the national retender process for category procurement services and the process had now commenced to formally close the Company.

Mrs Hanwell then assured the Board on the arrangements regarding the Procurement Team and the leadership which was now in place. She also outlined the work to look at implementing a new procurement system, noting work was progressing and was at pilot stage.

Miss McRae asked about the Vacancy Management Group. Mrs Hanwell noted this was required as part of the system financial management arrangements; that it was not designed to slow down or block recruitment, but provided check and challenge into the process.

Mr Wright noted the efficiency programme in place within the Trust would help to address the deficit as reported at month 3. He did, however, note that the ICB deficit was a much bigger issue and asked how this might be perceived nationally and whether it could lead to invoking special measures at any point in the future. Mrs Hanwell noted it was still early days and it was not possible to say if the measures in place would address the ICBs deficit or what action NHSE or the Department of Health might take in the future

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

23/084

#### **Report from the Medical Director** (agenda item 11)

Dr Hosker presented his Medical Director's report noting it had been written in the context of a period of industrial action by both the Junior Doctors and Consultants. He added that a significant amount of capacity within the directorate had been allocated to providing safe in-hours and out-of-hours cover to clinical services during the periods of industrial action.

He then drew attention to the work of the Andrew Sims Centre (ASC) in particular an event led by the ASC to remember the late Professor Andrew Sims who passed away earlier this year. Dr Hosker reported this had brought together past and present medical directors, Royal College Presidents and Deans, and staff from across the region. He added the event was a huge success and as a result, the ASC had been approached by external stakeholders to provide event management for similar large events. Dr Hosker also noted he had been approached about ensuring the longevity of the Andrew Sims Centre. Mrs Hanwell added there would need to be further discussions on the operating and funding model and welcomed a conversation taking place and agreed to pick this up with Dr Hosker outside the meeting.

DH / CHos

With regard to medical agency costs, Dr Hosker noted the work to manage not only agency spend, but to increase substantive appointments to medical vacancies.

Finally, Dr Hosker thanked Dr Ben Alderson noting he was stepping down as Guardian of Safe Working (GoSW) having held the position for the past three years. Dr Hosker noted that Dr Rebecca Asquith had taken up the post of GoSW with effect from 1 June 2023 and that she would be providing reports to the Board in future.

The Board discussed the report, in particular noting the difficulty in recruiting to consultant vacancies for posts in the Forensic Service at the Newsam Centre, the Learning Disabilities service, the Adult Acute service and CMHT



teams. However, Dr Hosker outlined some ongoing work to fill these vacancies.

The Board **received** and **considered** the report from the Medical Director.

**23/085**

**Guardian of Safe Working Annual Report (agenda item 12)**

Dr Hosker then presented the Guardian of Safe Working Annual Report. He noted this was an aggregation of the previous four quarter reports and that it also provided more information about the process followed to ensure safe working arrangements.

The Board **received** and **noted** the Guardian of Safe Working Annual Report.

**23/086**

**Report from the Director of Nursing, Quality and Professions (agenda item 14)**

Miss Sanderson presented her Director of Nursing, Quality and Professions Report. She highlighted the areas of work being undertaken in relation to: closed cultures; the Patient Safety Incident Response Framework (PSIRF); embedding of the ligature policy; and the ongoing arrangements for working with partners across the ICS in terms of learning and sharing good practice.

With regard to the CQC, Miss Sanderson noted the Trust had been allocated a new CQC relationship team, adding there had been a meeting in May to support the transition from the existing team in preparation for the implementation of the new CQC single assessment framework.

Miss Sanderson then spoke about the ligature policy and outlined some of the work to look at the clinical environment 'through the eyes' of the service user in terms of risks and how these might be mitigated.

The Board received and considered the report and supported the format. With regard to clinical supervision and the pilot that had been carried out, Miss Sanderson confirmed this way of carrying out supervision would be rolled out across other services and become business as usual.

Mrs Hanwell asked about the new ligature policy and if there were any particular areas which had been identified as needing investment. Miss Sanderson indicated that nothing of significance had been identified to date and assured the Board the assessments were being carried out in collaboration with colleagues from estates who can provide a particular lens to the risk assessments. Miss Sanderson also assured the Board that if there were consistent themes or issues identified which would impact more widely across the Trust, the Clinical Environments Group would identify such matters. Miss Sanderson also reported that good practice was shared with mental health partners outside of the Central Alerting System (CAS) and this learning was also considered within the Trust.

The Board **received** and **noted** the Director of Nursing, Quality and Professions report.

**23/087 Safer Staffing Report** (agenda item 15)

Miss Sanderson presented the Safer Staffing Report. She explained this provided an overview and consolidation of the information presented in the bi-monthly reports. Miss Sanderson added it contained a high-level overview of data and analysis on the position of the staffing on all wards against safer staffing levels and was for the retrospective period from the 1 November 2022 to the 30 April 2023.

In particular, Miss Sanderson drew attention to the work to recruit, retain and develop the nursing workforce; and the work to increase the student workforce, attracting people from outside Leeds alongside putting in place appropriate preceptorship arrangements to support newly qualified staff.

Miss Grantham supported the information provided in the report to allow the triangulation of data. Mr Wright noted the number of staff off sick with stress related illnesses. He noted this was looked at by the workforce committee and asked if there was anything to feedback in terms of reasons for this or key themes. Miss Grantham noted this was referenced in her report later in the agenda.

The Board **received** the Safer Staffing Report and **noted** the content.

**23/088 Report from the Director of People and Organisational Development** (agenda item 16)

Mr Skinner presented his report noting the volume of work undertaken in the first quarter of the year. He drew attention to the publication of the NHS Long-term Workforce Plan and assured the Board on the work being undertaken to ensure the Trust's People Plan was aligned to the Plan for the NHS more widely.

Mr Skinner also drew attention to the Trust having received the status of "Gold Award 2023" in the Employer Recognition Scheme, noting this was part of the Armed Forces Covenant to which the NHS was committed. Mr Skinner also noted the Workforce Team had been shortlisted in the CIPD Awards for *Best Health and Wellbeing Initiative Public/Third Sector*, adding the award ceremony was taking place on 21 September 2023 in London. He explained the examples selected to go forward for nomination were the Critical Incident Staff Support Pathway, the Menopause Group, and the Cost-of-Living Initiatives and Support.

Mr Skinner also referenced the staff thank you event "The Big Thank You Carnival" held at the end of June. He paid tribute to the team who had organised the event and noted the positive feedback that had been received from the staff who had attended.

The Board **received** and **noted** the report from the Director of People and Organisational Development.

**23/089 Approval of the Data Security and Protection Toolkit (self-certification)**  
(agenda item 17)

Mrs Hanwell presented the retrospective toolkit self-certification, noting the Trust was declaring compliant. She added there was an independent audit carried out which had supported the declaration, although she noted there were some improvements recommended which had been accepted.

The Board **received** the self-certification Data Security and Protection Toolkit and **noted** and **supported** the compliant declaration.

**23/090 Cyber security update report** (agenda item 18)

Mrs Hanwell presented the cyber security update report which set out the work undertaken and completed in regard to safeguarding the Trust's digital systems.

The Board **received** and **noted** the content of the cyber security update report,

**23/091 Emergency Preparedness Response and Resilience Annual Report (EPRR)** (agenda item 19)

Mrs Forster Adams presented the EPRR annual report, noting that in the past it was sufficient for this to be received by a committee of the Board. However, she explained that with a change in the NHS England standards it was now required to come to and be approved by the Board.

Mrs Forster Adams noted the huge amount of work now required to meet the new NHSE standards, adding this was underway including the development of two substantial policy documents which would also need to come to the Board in September.

Mr Wright noted the report had been received and supported by the Finance and Performance Committee.

The Board **received** and **approved** the EPRR Annual Report.

23/092

**Report from the Chair of the Audit Committee for the meeting held on 18 July 2023** (agenda item 20)

The Board received the Chair's report from the Audit Committee meeting that had taken place on 18 July 2023. In particular Mr Wright drew attention to:

- The Health and Safety Annual Report, noting this had been delayed in coming to the committee and was expected to come back to the October meeting.
- The governance arrangements for provider collaboratives, noting there needed to be further consideration as to how this was reported through the Board committee structure.
- The Hospitality Sponsorship and Gifts registers, noting these had been received by the committee which had raised a question around the definitions for each of these as set out in the policy, adding the committee had recommended these were reviewed to assist staff in their considerations.
- Reducing the load on non-executive directors in reading papers in advance of the meeting, with a suggestion there was a robust executive summary to assist with preparation for meetings.
- The use of electronic signatures and the suggestion there was a Trust policy on how these were used and applied, adding this was something that had been remitted to the Finance and Performance Committee.

Dr Munro noted the suggestion about executive summaries and suggested this was something that should be picked up by the Board at a future discussion session. Mrs Hill agreed to add to the forward plan.

CHill

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

23/093

**Report from the Chair of the Quality Committee for the meeting held on 6 June 2023** (agenda item 21)

The Board received the Chair's report from the Quality Committee meeting that had taken place on 6 June 2023. In particular Dr Healey drew attention to:

- A consideration of the committee's responsibilities in terms of its role in oversight and assurance of regulation related activities, such as CQC, and agreed to update its terms of reference to include this.
- The committee's observation in terms of the number of different reports and action plans received by services and an acknowledgement that additional support may be needed to support services in consolidating actions and recommendations.

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

23/094

**Report from the Chair of the Workforce Committee for the meeting held on 8 June 2023** (agenda item 22)

The Board received the Chair's report from the Workforce Committee meeting that had taken place on 8 June 2023. In particular Miss Grantham drew attention to sickness related to stress and anxiety, and assured the Board this was looked at on a regular basis by the committee through the Wellbeing Guardian's report.

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

23/095

**Report from the Leeds Committee of the WY ICB – 5 July 2023** (agenda item 23)

The Board **received** the report from the Leeds Committee of the WY ICB and **noted** the matters reported on.

23/096

**Use of the Trust's seal** (agenda item 24)

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

23/097

**Any other business** (agenda item 25)

Miss McRae noted this was the last public Board meeting for Mrs Hill and thanked her for all her hard work in supporting the Board, its committees and also individual Board members during her time as Associate Director for Corporate Governance and as Trust Board Secretary.

Ms Kahn also noted the passing of Heather Nelson, Chief Executive of Black Health Initiative, a member of the Trust's Synergi partnership. This was noted by the Board and condolences offered to her family.

The Board noted the items of other business.

23/098

**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 13:05 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.

