

**Minutes of the Finance and Performance Committee
28 November 2023 at 1pm (via Teams).**

Present: Mr Cleveland Henry, Non-executive Director (Chair of Committee)
Mrs Joanna Forster Adams, Chief Operating Officer
Mrs Dawn Hanwell, Chief Financial Officer and Deputy Chief Executive
Ms Nichola Sanderson, Director of Nursing and Professions
Mr Darren Skinner, Director of People and Organisational Development
Mr Martin Wright, Non-executive Director

In attendance: Ms Rose Cooper, Deputy Head of Corporate Governance (Committee Secretariat)
Mr Jonathan Campbell, Associate Director of Estates and Facilities (agenda item 9)
Mr Mark Dodd, Deputy Director of Operations (agenda items 1 - 8)
Mr Gerard Enright, Assistant Director of Finance
Mr Ian Hogan, Chief Information Officer
Mr Andrew Jackson, Resilience Lead & Corporate Business Manager (agenda item 11)
Mr Jon Salway, Carer Governor (observing)
Mr Jonathan Saxton, Deputy Director of Finance

		Action
23/103	<p>Welcome and Introduction</p> <p>Mr Henry welcomed everyone to the meeting.</p>	
23/104	<p>Apologies for absence (agenda item 1)</p> <p>Apologies from members had been received from Miss Katy Wilburn, Non-executive Director. Apologies from attendees had been received from Mrs Clare Edwards, Associate Director for Corporate Governance.</p>	
23/105	<p>Declaration of any conflicts of interest in respect of agenda items (agenda item 2)</p> <p>No declarations of interest were made.</p>	
23/106	<p>Minutes of the meeting held on the 24 October 2023 (agenda item 3)</p> <p>The minutes of the meeting on the 24 October 2023 were accepted as a true record.</p>	
23/107	<p>Approval for the minutes of the meeting held on the 24 October 2023 to be uploaded to the Trust’s external website (agenda item 3.1)</p> <p>The Committee agreed that the minutes of the meeting held on the 24 October 2023 were suitable to be uploaded to the Trust’s external website.</p>	

23/108 Matters arising (agenda item 4)

The Committee did not discuss any matters arising that were not already on the agenda.

23/109 Update on inpatient benchmarking (agenda item 4.1)

Mr Saxton informed the Committee that the inpatient benchmarking project had been moved to a Chief Operating Officer-led group at West Yorkshire level. It was agreed that Mrs Forster Adams would look into which group had been tasked with overseeing this work and report back to the Committee. Mrs Hanwell added that currently the inpatient benchmarking data was still unrefined, and it was noted that further consideration would need to be given by this Committee as to what inpatient benchmarking data it would be useful to receive going forward.

JFA

The Committee **noted** the update on inpatient benchmarking.

23/110 Cumulative action log (agenda item 5)

The Committee discussed the open actions and received the following updates:

Action 308: the Committee heard that the Trust was still not in possession of the Private Finance Initiative (PFI) benchmarking data from Equitex despite having chased and were awaiting a revised timescale for this.

Action 319: Mr Hogan agreed to provide an update on the review of the technical options available for electronic signatures at the January 2024 meeting.

Action 327: Mr Hogan advised the Committee that the debrief following the live cyber exercise in October would be presented to the January 2024 meeting.

Action 328: Mr Hogan informed the Committee that there was still no indication of when NHS England would release the learning from the Advanced cyber security incident or the response from the Information Commissioner's Office (ICO) but that he would continue to keep the Committee updated on this.

The Committee **received** the action log and **noted** the updates provided.

23/111 Chief Operating Officer Report including Winter Resilience and Operating Plan (agenda item 6)

The Committee received the report from the Chief Operating Officer and noted the escalations from a service delivery and performance perspective. Firstly, the Committee discussed the current out of area placements (OAPs) position which included placements across acute and psychiatric intensive care (PICU). The Committee highlighted the number appropriate out of area placements, recognised that this was an unusual position, and agreed to look into whether

there was a reciprocal 'no pay' agreement in place with neighbouring trusts for instances such as this. The Committee also suggested having a future Board strategic session focused on OAPs and inpatient capacity and flow in light of the ongoing challenges, the financial and quality risks, and the continued variability in terms of demand. It was agreed that Mrs Edwards would note this for the forward plan. Finally, the Committee noted that the OAPs financial provision to year end had been made at around the current operating level.

JFA / JS

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Next, the Committee received an update on the development of the Dolphin Manor Care Home which was expected to be operational early in the new year. The Committee understood that the proposed changes would increase capacity for the onward transition of older adults and help with the OAPs position in the long term. However, the Committee heard that there was more work to do with local authority colleagues to ensure their ongoing financial commitment to the service and it was agreed that Mrs Forster Adams and Mrs Hanwell would seek assurance on this matter.

JFA / DH

The Committee then discussed the international shortage of key medicines for people with Attention Deficit Hyperactivity Disorder (ADHD) and noted the decision to not take any new referrals to this service for the time being, with a further update due in January 2024. Ms Sanderson agreed to circulate a paper to Committee members which explained the medication shortages and the response from primary care. She also agreed to check with the Trust's Medical Director if any further action was required at Board level. The Committee then discussed the significant increase in ADHD referrals over recent years, noted that waiting lists continued to be a significant issue due to demand outstripping capacity, and heard about an upcoming all sector summit which would consider how this could be addressed at a West Yorkshire level. The Committee also noted the financial pressure of the 'Right to Choose' pathway on the Leeds Place which gives patients the right to decide which mental healthcare provider carries out their ADHD assessment.

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The Committee also noted the continued recovery of the Working Age Community Mental Health Teams under the leadership of the Head of Operations and Clinical Lead. However, Mrs Forster Adams highlighted that the Community Mental Health Transformation progression had been paused to allow time to strengthen the clinical and operational governance arrangements of the new community mental health model. She informed the Committee that more formalised arrangements were expected to be in place in the new year. The Committee also heard that the Trust's Medical Director was involved in strengthening the governance arrangements across the partnership.

The Committee noted the reduced number of beds available on the PICU ward at Red Kite View as a direct consequence of nursing vacancies and discussed the impact of service growth and development and asked if this could lead to a potential drain on staff in core services. The Committee recognised that there was a balance to be struck between the ongoing development of mental health provision in Leeds and workforce supply keeping pace. The Committee was assured to note that the Perinatal inpatient expansion was undergoing a process of managed implementation where roles would be advertised externally in the first instance and any staff appointed internally from core services would need to stay in their current post until backfill arrangements were in place. The Committee also discussed the changing landscape in terms of growth opportunities and

highlighted the need to consolidate and develop the Trust's current set of services as opportunities for expansion may decrease in the future.

Finally, the Committee agreed to pick up any issues relating to Emergency Preparedness, Resilience and Response as part of agenda item 11.

The Committee **considered** the report and the assurance it provided in relation to key escalations, **noted** that there were no significant changes to alert the Board to but **agreed** the areas of concern to highlight via the Chair's Report. The Committee also **received** the Winter Resilience and Operating Plan.

23/112 Chief Financial Officer Report (agenda item 7)

The Committee received the overview of financial performance at month 7, noted the current deficit position and the key risks linked to agency spend, OAPs and unidentified cost improvement plans and noted that progress was being made regarding the four thematic areas for efficiency. The Committee heard that work was underway to re-establish the Trust's quality impact assessment process with the first batch of efficiency schemes due for consideration in December 2023. The Committee agreed to discuss the Trust's financial position and system update in more detail as part of the finance report to the private meeting.

The Committee **noted** the revenue and capital position at month 7 and the actions being taken to ensure the delivery of the plan, in the context of the wider system challenges and the work to achieve financial balance; and **noted** that the planning work for 2024/25 had commenced with workstreams established to address any agreed system gaps.

23/113 Contract Development Analysis (agenda item 8)

The Committee discussed the Health Care Services Provider Selection Regime Regulations (PSR) 2023 which, once introduced on 1 January 2024, would mean that the procurement of healthcare services would be removed from the scope of the Public Contracts Regulations 2015. The Committee noted that PSR 2023 would provide a flexible process for procuring healthcare services in England, support integration and collaboration across systems and help to de-risk arrangements for partners, particularly those in the third sector. Mrs Hanwell added that the new regime would help to strengthen joined up working across the population boards.

The Committee heard that the team were working through the guidance and reviewing all healthcare contracts via the Financial Planning Group, with input from operational leads. The Committee was assured that there were minimal risks associated with this new regime but recognised the importance of transparency and good governance to mitigate the risk of external organisations challenging the decision to directly award a contract to a partner.

The Committee **received** the update on the current service development opportunities and risks and **noted** the progress with signing 2023/24 contracts.

23/114 2023/24 Organisational Priorities Quarter 2 Progress Report (agenda item 10)

The Committee received an update on progress regarding the Trust's 2023/24 organisational priorities and the high-level objectives taken from directorate strategic plans. The Committee recognised that there were many high-level objectives and underpinning tasks identified for 2023/24 but heard that despite this good progress had been made at quarter two. The Committee supported the number of objectives being streamlined for 2024/25.

The Committee discussed the red rated tasks which were categorised as incomplete with timescales that may not be achievable, some of which related to issues that the Committee had already discussed in detail such as the Trust's ADHD service and OAPs where progress was being made but the timescales and trajectory may need to be reviewed. The Committee also received an update on progress with plans to strengthen the Section 136 cover arrangements at Red Kite View which was currently a red rated task.

The Committee **considered** the Trust's position against its 2023/24 organisational priorities; **noted** the five new priorities which cross-cut into 2024/25; and was **assured** as to the systems and processes in place for monitoring and supporting the delivery of the objectives and underpinning tasks.

23/115 Quarterly Chair's Report from the Information Governance Group (agenda item 12)

Mr Hogan introduced the report and informed the Committee that a small number of data breach incidents had been escalated via the national Information Governance (IG) breach reporting tool and referred to the ICO. He explained that in response to these breaches they were putting together a communications plan for staff around legitimate access to CareDirector records and to reiterate the serious consequences for staff and the Trust of inappropriate access.

The Committee noted that IG training compliance was at 86.8% in September 2023 and discussed the changes to the Data Security and Protection Toolkit, particularly the removal of the 95% IG training target which had been replaced with two qualitative evidence requirements. The Committee asked about the model of assurance for meeting the new qualitative assessment and heard that the Information Management Strategy Steering Group was reviewing the processes around training and communications to meet the revised compliance requirements. Mr Hogan confirmed that the Trust would retain the 95% target for IG training compliance and combine this with the new qualitative measures.

The Committee **received** the Chair's Report from the Information Governance Group and **noted** the updates provided.

23/116 Estates and Clinical Environments Report (agenda item 9)

Mr Campbell introduced the Estates and Clinical Environments Report and highlighted areas for the Committee to note, including an update on two long standing CQC actions. The first related to the installation of safes which was 95% complete and the second related to the installation of cold water drinking taps in service user rooms which was fully complete. The Committee also heard that the Sustainability Team was undertaking a piece of work with an external consultancy to review and update the Trust's Green Plan with a view to developing a strategic road map of investment priorities before the end of this financial year.

Next, the Committee received an update on the security management audit action plan and noted the deadline of March 2024 for the completion of all actions. The Committee also noted an update relating to lone working devices, which was being progressed in line with the security audit action plan and noted progress with the displacement plan for the Perinatal expansion at the Mount. The Committee was also pleased to note the achievement of a rating of 'Excellent' from a Building Research Establishment Environmental Assessment Method (BREEAM) scoring perspective for the Red Kite View scheme.

The Committee **received** the Estates and Clinical Environments Report and was **assured** that good progress was being made against the key projects.

23/117 Emergency Preparedness, Resilience and Response (EPRR) Core Standards Assurance (agenda item 11)

The Committee reviewed the EPRR Core Standards Assurance, noted the new process in place and the outcome of this year's assessment which was a rating of non-compliant compared to a partially compliant rating in 2022. The Committee recognised that this was a disappointing score from NHS England but noted that a fall in ratings was a feature across mental health trusts in the Yorkshire and Humber region. Mr Jackson informed the Committee that some of the standards had been scored partially compliant because of minor technicalities and timing issues and that feedback was being shared with NHS England about the tight timescales for implementation and the applicability of some of the standards to mental health trusts. He added that they were as yet unaware of the consequences of non-compliance.

The Committee heard that a robust action plan would be developed to rectify the situation with input from Internal Audit, which the Committee would continue to receive progress updates on. The Committee discussed the expanded set of requirements including the EPRR portfolio requirement for health commanders and expressed concern regarding the significant time commitment for those involved. The Committee noted that the additional requirements were set in a challenging context of competing priorities and agreed that work should be undertaken to quantify the time and costs required to achieve compliance, which was a statutory requirement. It was agreed that Mrs Forster Adams and Mr Jackson would undertake this exercise as part of the action planning work and report back to a future Committee meeting.

JFA / AJ

The Committee did acknowledge the benefits associated with the revised process which included clearer guidance on what is expected for each EPRR standard which should encourage improvement over time. The Committee thanked Mr Jackson for the update and agreed to keep a watching brief on the situation.

The Committee **recommended** the ratification of the compliance statement to the Board of Directors. The Committee **noted** that the report gave further details of the outcome of this year's assessment, the themes in terms of areas of difficulty, and the development of a comprehensive action plan to rectify the situation. The Committee **agreed** to highlight this update to the Board of Directors.

23/118 Cycle of Business for 2024 (agenda item 13.1)

The Committee reviewed its Annual Cycle of Business for 2024 and noted that the report from the Private Finance Initiative (PFI) Concession Steering Group would be added to the cycle of business as a private item once the reporting frequency had been agreed.

The Committee **approved** its Annual Cycle of Business for 2024.

23/119 2024 Meeting Dates (agenda item 13.2)

Mr Henry advised members that some Committee meeting dates in 2024 may need to be moved or chairing responsibilities transferred to the other non-executive directors on the Committee due to annual leave. Ms Cooper would liaise with Mr Henry about this outside of the meeting. The Committee also noted that meetings could now be held in person at the new Trust Headquarters and asked that Ms Cooper agree the frequency of face to face meetings with Mr Henry.

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The Committee **noted** the meeting dates for 2024.

23/120 Any item that needs to be escalated to the Board of Directors or referred to another Board subcommittee (agenda item 14)

The Committee **agreed** the items to be included in the Chair's Report to the next public Board of Directors' Meeting on the 30 November 2023.

23/121 Any other business (agenda item 15)

The Committee did not discuss any other business.