

LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST

**Minutes of the Public Meeting of the Board of Directors
held on Thursday 27 October 2016
in Meeting Room 1&2, Trust Headquarters, 2150 Century Way, Thorpe Park,
Leeds, LS15 8ZB**

Board Members

		Apologies	Voting Members
Prof J Baker	Non-executive Director	✓	✓
Mr A Deery	Director of Nursing		✓
Mr F Griffiths	Chair of the Trust		✓
Mrs D Hanwell	Chief Financial Officer and Deputy Chief Executive		✓
Dr S Munro	Chief Executive		✓
Dr W Neil	Deputy Medical Director		✓
Mrs L Parkinson	Interim Chief Operating Officer		✓
Mrs M Sentamu	Non-executive Director (Deputy Chair of the Trust)	✓	✓
Mrs J Tankard	Non-executive Director		✓
Dr G Taylor	Non-executive Director (Senior Independent Director)		✓
Mrs S Tyler	Director of Workforce Development		✓
Mr K Woodhouse	Non-executive Director		✓
Mr S Wrigley-Howe	Non-executive Director		✓

In attendance

Mrs C Hill Head of Corporate Governance (secretariat)
Ms R Cooper Governance Assistant (minutes)
2 members of the public

Action

	The Chair opened the public meeting at 14.00 and welcomed members of the Board of Directors and members of the public.
16/167	Apologies for absence (agenda item 1) There were apologies for absence from Mrs Margaret Sentamu, Non-executive Director and Prof John Baker, Non-executive Director.
16/168	Declaration of change in directors' interests and any conflict of interests in respect of agenda items (agenda item 2) It was noted by the Board that there were no changes advised by any director in respect of their declarations of interest and that no director present at the meeting had declared any conflict of interest in respect of any agenda item to be discussed.
16/169	Opportunity to receive comments / questions from members of the public (agenda item 3) There were no questions from the public.

16/170	<p>Minutes of the meeting held on 15 September 2016 (agenda item 4.1)</p> <p>The minutes of the meeting held on 15 September 2016 were received and agreed as a true record of the meeting.</p>	
16/171	<p>Matters arising: Sharing Stories (September Board) Update Report (agenda item 5.1)</p> <p>Mrs Parkinson informed the Committee of the progress made to date having met with a carer (who shared her story at the September Board) to discuss how they would like the issues raised taking forward. It was agreed Louise Bergin, Triangle of Care lead, would contact the individual concerned and invite them to inform the training programme for staff to improve carer experience.</p> <p>To ensure the issues raised at sharing stories session are being picked up as part of the wider development work within the Trust, Mrs Parkinson agreed to meet with Andrew Howorth, Head of Patient Experience, to discuss how this will be taken forward.</p> <p>The Board agreed that there would be a standing item reporting the outcome of issues raised by service users and carers in their stories to the Board.</p>	LP
16/172	<p>Actions outstanding from the public meetings of the Board of Directors (agenda item 6)</p> <p>Mrs Hill presented the action log which showed those actions previously agreed by the Board at its public meetings, those that had been recently completed and those that were still outstanding. Mrs Hill provided the Board with an update on those items where the position had changed since the agenda papers were circulated and invited the Board to note the action taken and to be assured of progress.</p> <p>The Board noted that action 207 would now be included as part of the Mental Health Act performance report and presented to the Mental Health Legislation Committee.</p> <p>The Board received the actions agreed at previous public meetings that were still outstanding and noted progress in regard to these.</p>	
16/173	<p>Chief Executive's report (agenda item 7)</p> <p>Dr Munro presented the Chief Executive's report and outlined the activities she had undertaken in her first few weeks in post. In particular she noted those areas that she felt were a priority, including increasing communication</p>	

and support following the administration review; the need to recruit a substantive Medical Director; and the emphasis on partnership working in relation to the development of the West Yorkshire Sustainability and Transformation Programme.

The Board **received** the Chief Executive's report and **noted** the contents.

16/174

Integrated Quality and Performance (IQP) Report and quarter 2 monitoring return (agenda item 8)

Mr Deery presented the IQP report for quarter two of 2016/17 and noted that the Trust had met all its NHS Improvement (NHSI) targets to date. He explained that the exception report gives information regarding the position in relation to those targets on which the Board should be sighted, along with the actions being carried out to address any areas of poor performance. Mr Deery explained that from the 1 October 2016 the NHSI Single Oversight Framework (SOF) had replaced the Risk Assessment Framework and that this changes the way in which the Trust reports to NHSI.

He informed the Board that the trajectory for compulsory training had been reduced to 85%. Mr Deery advised the Board that the Trust had looked at its target of 90% against other trusts targets and had also looked at what the CQC expect by way of a target. He indicated that that for a number of legitimate reasons a 90% target was very challenging and advised that by reducing the target to a more realistic target of 85% this had resulted in the Trust now being compliant at 88%.

Mrs Tankard advised the Board that the Audit Committee had asked for a plan to be brought back to the committee which sets out the consequences for staff not completing either their compulsory training or undertaking appraisals. Mrs Tyler responded by saying that there currently exists an option to withhold pay progression for those staff who are not up to date with their compulsory training but suggested that providing support to those team or departments where progress is not being made could be more productive.

Dr Taylor noted that this matter had been discussed by the Board on a number of occasions she noted all the work that had been done in the past, but noted that the committee had asked for ET to consider what more can be done to address low uptake of both compulsory training and appraisals in some areas. Dr Neil noted the need to understand what the barriers are to achieving the targets in particular areas.

Mr Woodhouse expressed the view that there has to come a point where there are consequences. He also noted that those staff not being appraised were not being given the same opportunity as those staff who do have regular appraisals. He supported understanding the mitigating circumstances and address these.

Dr Munro fully supported the reasons why the target had been changed including the level of sickness in the Trust and turnover which impact greatly

on being able to ever achieve the higher target. She also agreed that a supportive approach be taken initially.

Mrs Hanwell presented the financial position noted that the income and expenditure position at quarter 2 was ahead of plan and that the Trust achieved an acceptable financial sustainability risk rating. Mrs Hanwell also advised the Board that Trust is achieving its internal surplus control target and that the STF funding for the firsts two quarters does not need to be returned if the overall total is not reached.

Mrs Hanwell also drew attention the CIP target noting that this was behind plan by 22%, noting that the next two quarters will be even more challenging. Mrs Hanwell noted that this had been discussed by the Finance and Business Committee in some detail. Dr Taylor outlined the discussion that had taken place at the committee, noting that this is a real risk in terms of slippage. She also noted that the committee had asked for ET look at what can be done differently and for there to be transparency in CIP targets that will be met and those that will not.

In regard to savings Mr Woodhouse suggested looking at investing more in IT systems to help improve staff productivity. Mrs Hanwell outlined the trials that have been undertaken to look at digital solutions, but noted that further work needs to be done in regard to OD and behaviours to be able to implement new solutions. Mrs Tankard also suggested looking again at the estate to see where savings can be made. She also highlighted procurement as a place where efficiencies can be made.

The Board discussed at some length the issue of potential savings that could be made. Dr Munro outlined the discussions that had taken place at ET with senior staff in the Trust to look at all the potential savings that can be made.

16/175 Single Oversight Framework (agenda item 8.1)

Mrs Hanwell presented a paper which provided the Board with an overview of the 'Single Oversight Framework' (SOF) noting that this had come into effect on 1 October to replace the Monitor Risk Assessment Framework, previously used to regulate governance and financial standing of foundation trusts.

Mrs Hanwell noted that the SOF represents a significantly different approach to regulatory oversight with an emphasis on identifying support requirements to help providers improve where necessary. She noted that overall the segment in which a provider is placed will reflect NHS Involvement's judgement of the seriousness and complexity of the issues it faces. NHSI will base this judgement on information obtained directly from the Trust and from third parties. She noted that the Executive Team is beginning to build up the required relationship with the NHSI regional team, to ensure the Trust is supported if necessary where appropriate and in the context of earned autonomy.

Mr Deery noted that some of the metrics on which the Trust currently reports have been changed, and noted that the national data sets will now be used as a measure and noted the importance of this information being wholly accurate.

The Board **received** an update on the Single Oversight Framework and **noted** the work being undertaken to report against the new regime.

16/176

Serious untoward incidents update and lessons learnt following the Trust Incident Review Group (TIRG) meetings held on 14 September and 14 October 2016 (agenda item 9)

Mr Deery introduced the report and explained that the backlog of investigations was now being addressed due to the recruitment of two new serious incident investigators. Dr Munro asked Mr Deery about the eight serious incident reports reviewed by the group during the September and October and questioned there having been no contributory factors or root causes identified. Mr Deery noted that there were lots of incidental factors in these cases. He also noted this comment and agreed to reflect on the point made by Dr Munro.

AD

Mr Wrigley-Howe asked whether the families of those patients who were placed out of area were being supported financially to allow them to make extra journeys to visit in order to help improve their patient experience. Mrs Parkinson assured the Committee that financial support for travel expenses is provided if people are eligible, but agreed to check if the Trust's charitable funds could be routinely used. The Board supported this as a way of appropriately using charitable funds.

LP

The Board **received** and **noted** the content of the report and was **assured** that the actions in respect of lessons learnt are being progressed appropriately within the Trust.

16/177

Safe Staffing Report (agenda item 10)

Mr Deery introduced the report and noted the significant staffing pressures currently being faced across the services with a particular issue in the forensic services. Mr Deery noted that 60% of services needed to compensate for a reduction in relevant nursing staff available. However, Mr Deery noted that by using the escalation processes services were able to manage the situation safely, but that this had had an effect on patient experience. Mr Deery informed the Board that by encouraging practices such as the proactive use of the e-rostering system it is expected that the number of agency staff would be kept to a minimum.

Mr Woodhouse asked whether pay incentives could be introduced to attract staff into hard-to-recruit-to areas. Mrs Tyler advised that this had already been tried in some areas but with limited impact on recruitment and

retention, and noted that incentives for one group of staff could have a negative impact on other groups of staff. The Board discussed the possible pay incentives that might be offered. Mrs Tankard suggested using one of the Trust's services that is currently finding it hard to recruit, as a test case for trying a new approach. Members of the Board agreed new incentive options need to be considered. Mrs Tyler noted the need to look at this as part of a wider strategy.

The Board **received** the safer staffing report and **noted** the exceptions and reasons for these occurring.

16/178

Complaints Summary Report (agenda item 11)

Mr Deery introduced the report noting that this provided activity and performance information in regard to complaints, PALS, compliments and claims during September 2016. He noted that complaints management training for staff had been in place since May 2015 and that the complaints review panel, made up of people with lived experience of mental health services, had been put in place. He noted that changes such as this had led to a drop in the number of complaints that had been re-opened.

Mr Deery reported that there had been a slight increase in the time taken to respond to complaints and that this is in part a capacity issue due to other pressures on staff's time.

The Committee discussed the language used in the report to describe the severity four complaints received in September 2016 and felt there was an inappropriate tone when referring to what had been said by patients and their families. Mr Deery noted this comment. He also agreed to bring back details of how the two complaints rated at severity four had progressed to the next meeting.

AD

The Board asked about the data on the clinical claims score card and asked for more information to be included in the report including the lessons learnt. Mr Deery then explained the process for claims information feeding into the CLIP report which will highlight any lessons learnt. Dr Munro suggested that a more detailed annual report about the NHSLA claims is presented to the Quality Committee for consideration.

AD

The Board **received** the complaints summary report and **noted** the progress being made.

16/179 West Yorkshire Sustainability and Transformation Plan update report (STP) (agenda item 12)

Mr Griffiths reminded the Board that the STP had been discussed in private earlier in the day. Dr Munro expressed disappointment that this document was not yet in the public domain and noted that the decision for the document to remain confidential at this point had not been made by the Trust. She noted that the STP will soon be made public by NHS England and supported this course of action. She also added that the Trust will continue to be an active partner in the process both in West Yorkshire and Leeds STPs, focusing in particular on delivery of the mental health five year forward view.

The Board **received** and **considered** the information provided in the report.

16/180 2016/17 Operational Plan implementation report – quarter 2 (agenda item 13)

Mrs Parkinson presented the summary report which highlighted challenges, areas of achievement, strategic risks and overall progress against the Trust's agreed annual priorities.

Mrs Tyler informed the Board that the Trust's intranet will be going live as planned on the 1 November 2016 despite not being fully ready. She noted that it would be beneficial to give staff the opportunity to provide feedback on those areas of the site that should be further developed.

Mr Woodhouse expressed concern that the system will be launched before it is ready and asked why it had not been known until now that it is not fit for purpose. Mrs Tyler defended this position and assured the Board that it is fit for purpose but still has some areas for development and that ET had considered this course of action at length. Members of the Board supported Mr Woodhouse's comments. Mr Griffiths asked the executive team to consider how it proceeds in this matter.

The Board **noted** the progress made against the Operational Plan priorities at the end of quarter two 2016/17; and confirmed that it was **assured** of progress made and that areas where areas of improvement and review have been identified, but asked for there to be further consideration as to how to proceed in regard to the Trust's intranet.

16/181 Verbal report from the Chair of the Audit Committee for the meeting held 26 October 2016 (agenda item 14)

Mrs Tankard provided a verbal report from the Audit Committee meeting held on 26 October. In particular she advised the Board that the committee had looked at:

- The risk management process with a focus on the Workforce Directorate risk register. She noted that the committee had suggested there being a risk included on the risk register in regard to agile working. Mrs Tyler noted that this will be part of the Workforce Strategy
- The Counter Fraud Annual Report, in particular the draft report in regard to the procurement fraud noting that the final report will be coming back to the Board in January
- The external audit plan, noting Brexit and the potential impact of this on the Trust. Mrs Tankard noted that ET need to consider the impact of Brexit on the organisation, not least the effect on staffing
- The internal audit reports in particular the number and age of some of the outstanding actions, noting that ET had been asked to ensure that the report is reviewed and appropriately updated.

The Board **received** and **noted** the verbal update.

16/182 Verbal report from the Chair of the Quality Committee for the meeting held 11 October 2016 (agenda item 15)

The Board **noted** that in the absence of Prof Baker there would not be a verbal report from the Chair of the Quality committee.

16/183 Verbal report from the Chair of the Finance and Business Committee for the meeting held 26 October 2016 (agenda item 16)

Dr Taylor provided a verbal report from the Finance and Business Committee meeting held on 26 October. In particular she advised the Board that the committee had looked at:

- The current quarter 2 financial position including the control total and the impact of achieving this
- The two-year operational plan financial framework
- The North of England Commercial Procurement Collaborative noting that the committee was assured of the exposure to risk.

The Board **received** and **noted** the verbal update.

16/184 Proposals for the process for Clinical Excellence Awards 2015/16 (agenda item 17)

Mrs Tyler proposed the next process for Clinical Excellence Awards for 2015/16. Mrs Tyler outlined the possible costs and the number of points that can be awarded.

The Board considered the proposed award process. Mrs Griffiths raised some concerns at the proposed make-up of the panel and suggested how the panel should be constituted. Mrs Tyler noted these changes.

The Board **considered** and **approved** the 2015/16 award process subject to the award panel membership being reviewed.

16/185 Board Assurance Framework (agenda item 18)

Dr Munro presented the Board Assurance Framework to the Board noting that this had been bought in order to assure the Board as to its content and the governance processes around the review of the framework.

The Board **received** the report and was **assured** as to its contents.

16/186 Emergency Preparedness, Resilience and Response Annual Report (agenda item 20)

The Board **received** and **noted** the Emergency Preparedness, Resilience and Response Annual Report.

16/187 Draft minutes from the Infection Prevention and Control and Medical Devices meeting held 25 August 2016 (agenda item 21)

The Board **received** and **noted** the minutes of the Infection Prevention and Control and Medical Devices meeting.

16/188 Safeguarding Adults Board Annual Report (agenda item 22)

The Board **received** and **noted** the Safeguarding Adults Board Annual Report.

16/189 Use of the Trust's seal (agenda item 23)

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

16/190 Any other business (agenda item 24)

There were no items of other business

16/191 | **Chair's Report** (agenda item 19)

Mr Griffiths noted that this is the last meeting for Mr Woodhouse. He noted the support and challenge that Mr Woodhouse has given to members of the Board, but more so the support he has offered to staff working out in the Trust. Mr Griffiths noted the importance of the challenge he has offered and that this has always been offered in good faith and always in support of improving the service provided to service users.

Mr Griffiths thanked Mr Woodhouse for the contribution that he has made to the Trust during the term of office and wished him all the very best for his future endeavours.

Mr Woodhouse responded by thanking directors for his time on the Board noting the work that has been done to improve the experience for service users.

16/192 | **Further Questions or Comments from the Public** (agenda item 25)

There were no further questions from members of the public.

At the conclusion of business the Chair closed the public meeting of the Board of Directors of Leeds and York Partnership NHS Foundation Trust at 15:59 and thanked members of the Board and members of the public for attending.

