### Minutes of the Annual Members' Meeting held on 31 July 2018 at 1.30pm at Horizon Leeds, 2 Brewery Wharf, Kendell Street, Leeds, LS10 1JR

## **Board Members**

Professor Sue Proctor	Chair of the Trust
Professor John Baker	Non-executive Director
Mrs Dawn Hanwell	Chief Financial Officer and Deputy Chief Executive
Mrs Lindsay Jensen	Interim Director of Workforce Development
Dr Sara Munro	Chief Executive
Mrs Margaret Sentamu	Non-executive Director
Mrs Sue White	Non-executive Director (Deputy Chair of the Trust)
Mrs Cathy Woffendin	Director of Nursing and Professions
Mr Martin Wright	Non-executive Director
Mr Steven Wrigley-Howe	Non-executive Director (Senior Independent Director)

### Governors

Mr Steve Howarth	Lead Governor (Public: Leeds)
Mr Marc Pierre Anderson	Service User: Leeds
Mrs Sarah Armstrong	York Council for Voluntary Services
Cllr Jenny Brooks	City of York Council
Ms Sarah Chilvers	Non-clinical Staff: Leeds and York & North Yorkshire
Mr Les France	Public: Leeds
Mrs Gillian Galea	Staff Clinical: Leeds and York and North Yorkshire
Ms Joanne Goode	Staff Clinical: Leeds and York and North Yorkshire
Mr Andrew Johnson	Staff Clinical: Leeds and York and North Yorkshire
Ms Sarah Layton	Non-Clinical Staff: Leeds and York & North Yorkshire
Mrs Kirsty Lee	Public: Leeds
Dr Ivan Nip	Public: Leeds
Mrs Sally Rawcliffe-Foo	Staff Clinical: Leeds and York and North Yorkshire
Ms Ann Shuter	Service User: Leeds
Mrs Niccola Swan	Public: Rest of England and Wales
Mr Peter Webster	Public: Leeds

### In attendance

Mrs Cath Hill	Associate Director for Corporate Governance / Trust Board
	Secretary
Mr Andy Weir	Deputy Chief Operating Officer (in attendance for the Chief
	Operating Officer)
114 Members of the T	rust and members of the general public

### Action

### 18/001 Welcome (agenda item 1)

Professor (Prof) Proctor opened the meeting at 1.29pm and welcomed members of: the Board of Directors; the Council of Governors; the Trust; and the wider public.

Prof Proctor informed everyone that this would be her second Annual Members' Meeting as Chair of the Trust. She described the last year as 'momentous', especially as it was the 70<sup>th</sup> birthday of the NHS. Prof Proctor highlighted some of the events that had taken place over the previous few months to celebrate the 70<sup>th</sup> birthday.

She went onto say that since the last Annual Members' Meeting, there had been a number of new Board members join the Trust. They were introduced: Mr Martin Wright, non-executive director and new Chair of the Audit Committee; Ms Helen Grantham, non-executive director; and Mrs Cathy Woffendin, Director of Nursing and Professions. Prof Proctor thanked Mr Paul Lumsdon, who was interim Director of Nursing, Professions and Quality. Prof Proctor gave thanks to Mrs Susan Tyler, Director of Workforce Development, who retired in May 2018, and Mrs Julie Tankard, non-executive director and former Audit Committee Chair, who stepped down in January 2018.

The programme for the Annual Members' Meeting was presented by Prof Proctor. She explained that the event would take place in two parts, the first of which was the statutory Annual General Meeting. This would be followed by 'The Big Conversation' which would be an opportunity to discuss quality within the Trust, and to capture feedback for improvements.

## **18/002** Apologies for Absence (agenda item 2)

Apologies were received from: Mrs Joanna Forster Adams, Chief Operating Officer; Ms Helen Grantham, Non-executive Director; Dr Christopher Hobbs, governor Carer: Leeds Resident; Mrs Helen Kemp, appointed governor, Volition; Dr Claire Kenwood, Medical Director; Ms Ellie Palmer, governor, Service User and Carer: Rest of UK.

The meeting was quorate.

# **18/003 Declaration of any conflicts of interest in respect of agenda items** (agenda item 3)

No one present at the meeting declared any conflict of interest in respect of any agenda items.

### **18/004** Minutes of the Meeting held 19 September 2017 (agenda item 4)

Prof Proctor presented the minutes of the meeting held on 19 September 2017. They were agreed as a true record.

### **18/005** Matters arising (agenda item 5)

It was noted that there were no matters arising from the previous meeting.

### **18/006 Presentation from Steve Howarth, Lead Governor** (agenda item 6)

Prof Proctor welcomed Mr Howarth, Lead Governor, to present the report from the Council of Governors.

Mr Howarth presented the membership report. He outlined that there were 15,664

members at the end of March 2018. The breakdown of which was: public members 11,948; service user and carer members 1,167; and staff members 2,549. He also outlined that a key element of membership at the Trust is to reflect the diverse nature of the community. He reported that membership representation is closely monitored by the Trust's Membership Team and reported back to the Council of Governors. Mr Howarth acknowledged the importance of members providing a voice for the public to the Trust, and how the role of 'governor' facilitates this.

Mr Howarth explained that the role of the governors is to hold the non-executive directors to account for performance of the Trust. The Council of Governors' meetings give them an opportunity to ask about any areas of poor performance and how they are holding executive directors to account on this. Governors are invited to observe Board of Directors' meetings and the sub-committee meetings to provide further opportunity to see non-executive directors in action and how the executive directors are held to account. He informed the attendees that at a joint Council of Governors/Board of Directors meeting in September 2017, governors had the opportunity to influence the Trust's refreshed strategy and shape the Trust's strategic objectives. Next, Mr Howarth explained how governors have a statutory duty to represent the views of members in shaping the future direction of the Trust. Ways in which governors had been involved with this were: through Council of Governors meetings; Crowdsourcing on the update of the Trust's Strategy; through their Strategy Committee; and by being members of a strategy project group within the Trust.

Mr Howarth went on to outline the four areas that the Council of Governors collectively agreed to focus on in 2017/18. These were: workforce and staffing; improving service user experience and involvement; information about a greater breadth of Trust services; and information about the impact of Trust services. He went on to detail the other things that the governors had been involved with in 2017/18, including appointing two new non-executive directors. He reminded the attendees that it had been the NHS's 70<sup>th</sup> birthday on the 5 July 2018 and that governors had been involved in the preparations for the celebrations and they had also attended many of the celebratory events.

An update was then presented on the outcome of the two governor elections that had taken place in the year. Mr Howarth encouraged members to stand for election as there were vacancies within the Council. He took the opportunity to welcome the governors that had been newly or re-elected or appointed within the 2017/18 financial year. He also offered thanks to those governors who had served and stepped down during the year.

Next, Mr Howarth informed attendees of the Big Conversation that had taken place at the Annual Members' Meeting in 2017. He outlined the themes of feedback that came out of the 'Big Conversation' and some ways that the governors ensured that the members' views were taken into account.

Finally, Mr Howarth thanked to everyone for attending and encouraged individuals to speak with a governor should they wish to find out more information.

Prof Proctor thanked Mr Howarth for his presentation and noted the valuable contribution that governors make in helping to develop services and informing how the Trust can provide high quality care.

# 18/007 Presentation from Dawn Hanwell, Chief Financial Officer and Deputy Chief Executive (agenda item 7)

Prof Proctor welcomed Mrs Hanwell, Chief Financial Officer and Deputy Chief Executive, to present the report on the Trust's finances.

Mrs Hanwell presented the key elements of the financial report including the financial performance out-turn for 2017/18; service changes and investments; income and expenditure position; cost improvement plans; capital programme; assurance on financial statements and future sustainability. She noted that the financial performance of the Trust was good and that staff members work to keep the Trust financially strong.

Next, the key headlines were presented. Mrs Hanwell indicated that the Trust had achieved a year-end surplus of £5.6million (m) noting that a £3.8m surplus had been generated. She reported that the Trust had spent £1.7m on capital expenditure. Mrs Hanwell explained that the Trust had generated cost savings of £2.8m and that the Trust was in a strong cash position. She went onto outline the details of the national Sustainability and Transformation fund programme and the requirements set out by NHS Improvement, Trust regulators, on delivering a surplus.

The Board of Directors devised a way to create the required surplus without compromising patient care. In return for generating a surplus, the Trust gets access to central funds for investment.

Mrs Hanwell went onto say that there had been a number of financial risks facing the Trust during the year, in particular spending on Out of Area Placements (OAPs). She explained that these were national cost pressures the Trust has to fund themselves and can vary, dependent on whether an appropriate bed is available, or not, for a service user requiring the use of Trust services. She then reported that the Trust had generated £2.79m through Cost Improvement Programmes (CIPs) in the financial year 2017/18 (£2.08m in 2016/17). She informed the attendees that this equated to a 1.8% saving in the Trust and all CIPs are quality impact assessed to ensure efficient saving without compromising patient care. Next, Mrs Hanwell outlined the Trust's capital programme and reported that the Trust's expenditure for 2017/18 was £1.74m. Mrs Hanwell highlighted the key investments in the year, which were: estates refurbishment; and information technology improvements (virtual desktops, smartphones, agile processes, public WiFi etc.).

In conclusion, Mrs Hanwell reported that the Trust was in a strong financial position. She stated that for the financial year 2018/19, the Trust would be required to generate a surplus again for the Sustainability and Transformation fund programme. She outlined the service developments planned for 2018/19, including: non-recurrent schemes being made recurrent (Memory Support Workers and Liaison); non-recurrent liaison; perinatal community bid; and ongoing non-recurrent support for OAPs. Mrs Hanwell reported that the Trust planned to spend £9m on improving estates and improving IT systems.

Prof Proctor thanked Mrs Hanwell for her presentation.

## **18/008** Presentation by Dr Sara Munro, Chief Executive (agenda item 8)

Prof Proctor welcomed Dr Munro, Chief Executive, to present the report on the Trust's values.

Dr Munro thanked everyone for attending the event. She began by reminding the attendees that in the financial year of 2016/17, the Trust's Strategy had been refreshed, embedding the new Trust values: integrity, simplicity, caring. Dr Munro outlined plans for the future for continuous improvement and to encourage and welcome feedback. In the financial year 2017/18, the Board of Directors and the Council of Governors collaboratively finalised the three strategic objectives. They were now:

- 1. we deliver great care that is high quality and improves lives
- 2. we provide a rewarding and supportive place to work
- 3. we use our resources to deliver effective and sustainable services.

Dr Munro introduced a video which highlighted different specialist teams within the Trust and the health and wellbeing of staff to ensure the best services going forward. Following this Dr Munro thanked all individuals who had been involved with the production of the video.

Next, Dr Munro presented the five strategic plans that underpin the main Trust Strategy. Those plans were: workforce, quality, clinical services, estates, and information technology. She explained that in 2017/18 a new five year funding deal for the NHS in England was agreed, giving the Trust an extra 3.4%, which was an improvement on previous years. Dr Munro explained that the West Yorkshire and Harrogate Health and Care Partnership area was evolving into an integrated care system. This system supports health and care organisations working collaboratively to improve services within a new system. Being an integrated care system gives the Trust access to additional funds of up to £9 million. Dr Munro informed the attendees that the Trust was working with other NHS trusts as part of the West Yorkshire Mental Health Collaborative. The trusts are leading on four priority areas:

- 1. reducing deaths by suicide
- 2. improving specialist mental health services such as eating disorders
- 3. reducing out-of-area placements
- 4. improving urgent and emergency care.

Dr Munro went on to highlight clinical service developments. These included the community mental health services redesign in Leeds, the new eating disorders community service for West Yorkshire and Harrogate (CONNECT), the national service for armed services veterans which went live in April 2018 in England and was currently being rolled out in the North of England, and additional investment for liaison psychiatry and perinatal services.

Attendees were then updated on the Care Quality Commission (CQC) inspection that had taken place during the financial year 2017/18. Dr Munro explained that the CQC rates care organisations by scoring them on five different domains. These are: safe; effective; caring; responsive; and well led. She stated that 85% of the Trust services were rated good or outstanding, with the Trust's overall rating being requires improvement. A new action plan which contains 20 'must do' actions and 32 'should do' actions had been agreed. Dr Munro said that the Trust was also involved in a development scheme called 'Moving to Good' by NHS Improvement

to help move towards the longer term ambition of providing 'outstanding' services.

Dr Munro went on to present the three Quality Account highlights for 2017/18, which were clinical effectiveness; patient safety; and patient experience. Dr Munro informed the attendees that the Trust was able to register and benchmark services with several nationally recognised bodies. She also explained that to measure patient safety, the Mental Health Safety Thermometer had been used. This found that 4 out of 30 services were 100% harm free and 17 were more than 80% harm free. Dr Munro stressed that any amount of harm could be highly impactful on any individuals. Dr Munro highlighted that in terms of patient experience, there had been good feedback from community and inpatient mental health surveys last year, and all but one inpatient service scored either in the top 20% or middle 60% when compared to other organisations.

Dr Munro moved onto the Staff Survey 2017 results and reported that 70% of staff believed care of service users is the Trust's top priority, which was an improvement on 2016 results. More staff than in 2016 also would recommend the Trust as a place to work and would be more than happy with the standard of care that is provided, meaning staff experience was a significantly positive area for the Trust and better than the national average in some aspects. The Trust also performed well on workforce race equality, with a 4% reduction in the number of black and minority ethnic (BME) staff experiencing harassment, bullying or abuse from service users, relatives or the public. Results also showed that 81% of BME staff believed the Trust provided equal opportunities for career progression or promotion – an improvement on 2016 results and 4% above the national average. Dr Munro highlighted that there were still areas to improve on. She reported that a way to improve results was to provide individual teams with their results so that they could come up with action plans that were meaningful to them.

Finally, Dr Munro presented seventeen reasons to be proud within the Trust. She outlined that further details of these could be found in the Annual Review and encouraged attendees to read it.

Prof Proctor thanked Dr Munro for her presentation.

# **18/009 Opportunity to Receive Questions from Members and the Public** (agenda item 9)

Prof Proctor thanked Mr Howarth, Mrs Hanwell, and Dr Munro for their presentations. She explained that the next part of the meeting was an opportunity to receive questions from members of the public and she encouraged them to do so.

A member of the public asked how the Trust could involve service users as part of the recruitment process. Mrs Woffendin outlined the importance of this and provided examples of how this works within the Trust. She outlined the training required to be part of the service user panel and suggested that Sayed Ahmed (Patient Experience Manager) or Angela Earnshaw (Head of Learning and Organisational Development) provide further information on this.

Leanne, (service user and carer) reported that some of the feedback that she had gathered from the community services redesign project outlined the issues with

home based treatments not being the best for all service users. She said that some service users have expressed concern that 'one size fits all' would not work. Dr Munro responded to say that different people prefer support and treatment in different settings. She explained that an aspect of the community services redesign would be to have social hubs where other providers/third sector and local authorities can discuss the offer of a new setting. She introduced Andy Weir, Deputy Chief Operating Officer, and attendees noted that they could discuss this matter with him further.

Alex, member of the public, asked Mrs Hanwell if there was a direct relationship between the surplus and the underspend as they were two different amounts. Mrs Hanwell said that the income and the expenditure meant that there would be more funds to be spent on future investments.

Annie, a carer, referred to the discussion that had taken place as part of the Annual Members' Meeting in 2017. It related to carer engagement and carer feedback. Annie explained about the Triangle of Care, which is an approach specifically for mental health organisations to better engage and involve carers, and to facilitate a forum to capture feedback which can help make service improvements. She requested an update on this work and other developments within the Trust designed to support carers.

Paul, a member of the public, asked about funding for service users and carers who engage in voluntary service user involvement. It was noted that there is a procedure which covers the engagement and involvement of service users within the Patient Experience Team (PE-0003). Finally, Peter, a member of the public, asked about employment opportunities for service users within the Trust. He explained that the involvement was essential in developing the services and those involved felt this was an incentive to get involved. Dr Munro responded by highlighting some service user and carer engagement pieces of work. She explained that Mrs Woffendin and Mr Ahmed (Patient Experience Manager) are reviewing how patient and carer experience can be developed. Dr Munro explained that more creative opportunities for voluntary or employment appointment had been looked into as well. Dr Munro invited further discussion on the matter.

Prof Proctor thanked all attendees for listening and participants in the wide-ranging discussion that had taken place.

At the conclusion of formal business the Chair closed the Annual Members' Meeting of the Leeds and York Partnership NHS Foundation Trust at 2.33pm and thanked everyone for attending.