

LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST

**Minutes of the Public Meeting of the Board of Directors
held on Thursday 27 January 2022 at 9:30 am.
This meeting was held virtually**

Board Members

Apologies

Prof S Proctor	Chair of the Trust
Prof J Baker	Non-executive Director
Mrs J Forster Adams	Chief Operating Officer
Miss H Grantham	Non-executive Director (Deputy Chair of the Trust)
Mrs D Hanwell	Chief Financial Officer and Deputy Chief Executive
Mr C Henry	Non-executive Director
Dr C Hosker	Medical Director
Miss M McRae	Non-executive Director
Dr S Munro	Chief Executive
Mr D Skinner	Interim Director for People and Organisational Development
Mrs S White	Non-executive Director
Mrs C Woffendin	Director of Nursing, Quality and Professions
Mr M Wright	Non-executive Director (Senior Independent Director)

All members of the Board have full voting rights

In attendance

Mrs C Hill	Associate Director for Corporate Governance / Trust Board Secretary
Ms K McMann	Head of Corporate Governance / Deputy Trust Board Secretary
Dr C Davidson	Consultant Psychiatrist (for minute 22/001)
Mrs R Pilling	Carer Coordinator, Patient and Carer Experience Team (for minute 21/001)
Four members of the public observed the meeting (including two governors)	

Action

22/001

Prof Proctor opened the public meeting at 09.30 am and welcomed everyone.

Sharing Stories (agenda item 1)

Dr Davidson made a presentation to the Board on how the Trust prepares and trains its staff to support service users with neuro-diversity issues. He focused on autism, in particular the work of the Green Light Steering Group in relation to improving access to mental health services for people with autism. He spoke about a survey of staff that had been carried out and the findings from this. He then outlined the actions being taken in response to the findings, which included the development of staff training, and changes to the way information is captured on CareDirector.

Dr Hosker asked if the work was being shared with partners. Dr Conor reported that some joint work was being carried out in conjunction with partners across the ICS and locally with Leeds Teaching Hospitals NHS Trust.

Mrs White noted that Red Kite View had been designed to be autism-friendly and asked if there were other units that could benefit from advice from Dr

Davidson's team. Dr Davidson confirmed that a specialist nurse had worked closely with the Estates Team on the design of Red Kite View, but recognised there could be other opportunities to assist with advice, design and layouts for other sites.

Mrs White also asked about staff with autism and how the Trust supports them. Dr Davidson reported that a training session had been developed specifically for colleagues with autism which was being trialled with a view to rolling this out more widely.

It was noted that a number of questions had been put into the Zoom chat function and it was agreed these would be shared with Dr Davidson and responses circulated to members of the Board.

KM

The Board **thanked** Dr Davidson for attending the Board and raising awareness of the findings from the survey and outlining the actions being taken to address the recommendations.

Dr Davidson left the meeting.

22/002 Apologies for absence (agenda item 2)

There were no apologies for absence.

22/003 Declaration of interests for directors and any declared conflicts of interest in respect of agenda items (agenda item 3)

No member of the Board declared a change in interests or a conflict in any agenda item.

22/004 Minutes of the previous meeting held on 25 November 2021 (agenda item 4)

The minutes of the meeting held on 25 November 2021 were **received** and **agreed** as an accurate record.

22/005 Matters arising (agenda item 5)

It was noted there were no matters arising from the minutes.

22/006 Actions outstanding from the public meetings of the Board of Directors (agenda item 6)

Prof Proctor 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.

Mrs Hanwell provided details of the actions being taken to address the issues regarding estates for the ALPS Team, NICPM and the Perinatal Service. She

noted that with regard to the accommodation for the ALPS Team, the Trust was actively working with Leeds Teaching Hospitals NHS Trust (LTHT) to find new appropriate accommodation, adding there was specific central funding for the provision of mental health services in Accident and Emergency Departments which could be used in support of this work.

With regard to NICPM, Mrs Hanwell noted that it had been agreed that a room booking system would be used by Trust staff to allow access to therapy rooms on the LTHT site, and that it was expected this would alleviate the problems previously encountered with access to therapy kitchens.

Mrs Hanwell then updated on the accommodation arrangements for the Perinatal service noting this would remain in Parkside Lodge until an alternative solution could be found.

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

22/007

Report from the Chief Executive (agenda item 7)

Mrs Hanwell provided an update for the Board noting the Trust went into Business Continuity on 4 January 2022 with a focus on keeping services operational whilst keeping service users and staff safe during the current surge. She added there had also been a focus on maintaining the vaccination programme and progressing the Vaccination as a Condition of Deployment (VCoD) regulations.

Mrs Hanwell then updated the Board on matters relating to the Integrated Care System, noting the Leeds and West Yorkshire systems were continuing to develop their operating models with a view to these being in place for 1 April, when the ICS would be formed in a shadow format, ahead of being made a statutory body in July. Mrs Hanwell then advised of the recent appointments that had been made to the Integrated Care Board and the posts that were in the process of being appointed to.

With regard to Red Kite View, Mrs Hanwell noted that the unit had now opened and asked the Board to extend its thanks to all those staff who worked to ensure the unit was operational. Mrs Hanwell also reported that the Project Board would remain in place to support staff at the unit in the first few weeks of opening.

Mrs Hanwell then invited the Executive Directors to provide an update on key issues within their areas of responsibility.

Mrs Woffendin advised the number of outbreaks had significantly reduced since the last report to the Quality Committee, noting the Trust was currently managing five separate outbreaks and outlined the number of individual cases these included. Mrs Woffendin then explained the positive impact on the workforce that the reduction in the number of days for the COVID isolation period following infection was having. However, Mrs Forster Adams noted that despite this there continued to be challenges to the Trust's capacity to

admit service users due to some wards needing to close to admissions as a result of impact of COVID.

With regard to governance arrangements, Dr Hosker advised that as a result of Business Continuity some meetings had been paused. However, he noted that many of the clinical governance groups were continuing to meet on a reduced basis to oversee the safety of services, and that assurance reports were being made to the Quality Committee.

Mr Skinner updated the Board on the position relating to Vaccination as a Condition of Deployment (VCoD), noting that the number of in-scope staff who had not declared their vaccination status had reduced to 66; that 42 members of staff had confirmed they would not be taking up the vaccine; and there were 17 staff who were exempt on medical grounds. Mr Skinner then outlined the steps being taken to speak with individual staff who were reluctant to take up the vaccine; to provide encouragement and support and understand the underlying reasons for this. He also outlined the steps being taken to provide support to those staff who were due to be dismissed due to them not being vaccinated and indicated some of the citywide work to look at where other roles might be available for them.

Mrs White asked what roles were carried out by the staff who had refused the vaccine and at what point it would be possible to re-appoint to those roles. Mr Skinner advised that the majority of these were patient-facing roles and that it would not be possible to recruit to these roles until the formal dismissal process had been completed, as there was always the possibility some of these staff would ultimately take up the vaccine.

Miss McRae asked whether any advice had been taken about the potential action NHS staff might take following the implementation of the VCoD regulations. She also asked if advice had been taken on the matter of the Trust having a duty of care to service users who might be treated by a member of staff who had not been vaccinated. Mr Skinner explained the work to identify the staff who were in scope under the VCoD regulations. He also advised that NHS England had taken legal advice and were working closely with solicitors to look at all the legal implications and provide advice nationally. However, he noted that because VCoD was a statutory requirement it was unlikely that any action taken against an organisation would be successful. On the matter of the Trust's duty of care for service users, Mr Skinner indicated that it had a duty to ensure that any staff providing patient-facing care did so in a safe way and that the vaccination programme and the stringent infection prevention controls in place supported this duty of care.

Miss Grantham asked about the impact VCoD would have on the health and social care sector as a whole. Mr Skinner acknowledged that this would likely create a problem of staff availability across the whole system as it was clear that some people would not be able to work in the sector due to them not being vaccinated.

The Board **received** a report from the Deputy Chief Executive and the other Executive Directors.

22/008

Report from the Chair of the Quality Committee for the meetings held on 14 December 2021 and 11 January 2022 (agenda item 8)

Prof Baker presented the Chair's reports from the Quality Committee meetings that had taken place on 14 December 2021 and 11 January 2022. In particular he drew attention to the reports on the management of the recent COVID surge including the assurance provided on the infection prevention controls in place.

With regard to the Quality Strategic Plan, Prof Baker advised that the Committee had supported the review date being extended by one year. This was noted by the Board.

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

22/009

Ratification of the Quality Committee Terms of Reference (agenda item 8.1)

The Board **received** and **ratified** the amended terms of Reference for the Quality Committee.

22/010

Report from the Chair of the Audit Committee for the meeting held on 18 January 2022 (agenda item 9)

Mr Wright presented the Chair's report from the Audit Committee meeting that had taken place on 18 January 2022. In particular he drew attention to:

- The Internal Audit Progress Report, noting that the review of two reports that had been given a rating of limited assurance had been deferred to the next meeting to allow the lead Executive Directors to focus on the management of the pandemic. However, he noted that assurances had been received outside the meeting in relation to the actions agreed to address the recommendations
- The Care Director audit report which had been rated as providing significant assurance. However, he noted there had been a suggestion that the culture around the use of the system amongst the clinical staff needed to be embedded and this might be something the Finance and Performance Committee wish to look at.

Prof Proctor noted that the Grievance and Disciplinary audit had been rated as providing limited assurance and asked if the Grievance and Disciplinary procedure needs to be reviewed in light of the implementation of VCoD. Mr Skinner noted that the audit had been carried out prior to work commencing on the procedure and assured the Board the issues raised in the audit report were already being addressed.

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

22/011

Report from the Chair of the Workforce Committee for the meeting held on 2 December 2021 (agenda item 10)

Miss Grantham presented the Chair's report from the Workforce Committee meeting that had taken place on 2 December 2021. In particular she drew attention to the assurances received on the Trust's People Plan. She also noted that assurances had been received in relation to the new governance arrangements for the People and Organisational Development directorate which were now in place.

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

22/012

Report from the Chair of the Finance and Performance Committee for the discussion held on 25 January 2022 (agenda item 11)

Mrs White presented the Chair's report from the Finance and Performance Committee meeting that had taken place on 25 January 2022. She noted this had been a shortened meeting and the process for signing off the Financial Plan had been discussed. She also advised the Committee had been advised on the pressures within services and had been assured on the steps being taken to manage the challenges presented by the latest surge in COVID-19.

With regard to the sign-off of the financial plan, the Board discussed the possible dates when this could be received by the Finance and Performance Committee and then the Board. Mrs Hanwell explained that during the process of developing the plan the Board would be kept updated on the risks and issues and that it would be asked to formally sign off the plan at the end of April in an extraordinary meeting.

Prof Proctor then outlined the items that would be discussed at the February Strategic Discussion session and noted that she and Mrs Hill would put together the agenda for this. She also noted that guidance had been received on NED Champions and that a paper on this would be presented at the March private Board meeting to show how the Trust will meet this guidance.

SP / CHill

SP / CHill

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

22/013

Report from the Chief Operating Officer (agenda item 12)

Mrs Forster Adams presented the Chief Operating Officer's report and noted the key points in the report had already been addressed by the Board. However, she provided a further update on a number of matters noting that

the NHS remains in Level 4 Incident mode and that in light of the challenges being faced by services the Trust had taken the decision to remain in Business Continuity.

With regard to service delivery, Mrs Forster Adams drew attention to the challenges and the way these were being addressed, including staff availability and the need to deploy some staff into acute and urgent services to ensure their safe delivery over the Christmas period. She explained the challenges there had been in relation to the capacity to admit to the Trust's inpatient services noting this was an issue not only for the Trust, but also for out of area beds.

With regard to the detail in the performance report, Mrs Forster Adams noted that each element of the report had been looked at in detail in the various Board sub-committees and assurances provided on the actions being taken to address any areas of concern.

Prof Baker noted the disconnect between the messages being given to the population more generally, and the messages coming from NHS England relating to how COVID will be managed within the NHS at the present time. He added that this could cause tension within service areas. Mrs Woffendin advised that as part of the Incident Management process weekly communications had been sent to staff to explain the ongoing need to maintain stringent Infection prevention control measures within the work environment and to remain vigilant whilst in the wider community.

The Board asked about the arrangements to support staff wellbeing. Dr Munro explained the work being carried out by the Wellbeing Manager to gain assurance that processes were in place to help support staff during these challenging times and to ensure they have a route through which they can raise issues.

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

22/014

Chief Financial Officer's Report (agenda item 13)

Mrs Hanwell presented the Chief Financial Officer's Report advising that it was likely the Trust would be in surplus at the end of the financial year and there were valid reasons behind this. She added that this had been highlighted to the ICS. Mr Wright noted that provisions would be a focus of the year-end audit to ensure these were appropriate, adding that this was one of the areas of audit that would be looked at not only in the Trust but across the NHS more widely. He explained that whilst there was no suggestion that the Trust's provisions were not appropriate, any reduction in provisions would affect the level of surplus.

Mrs Hanwell then advised that a fundamental re-basing exercise was being carried out in relation to budgets to ensure these reflect the needs of services going forward.

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

22/015

Safe staffing report (agenda item 14)

Mrs Woffendin presented the Safe Staffing report and drew attention to its main sections. In particular she reported that despite the challenges of the pandemic there had only been one breach during the period 1 May 2021 to 31 October 2021, and this was fully mitigated at the time and no patient safety incident occurred as a result of this. Additionally, Mrs Woffendin assured the Board that learning from this breach had been reviewed through the Safer Staffing group and the recommendations implemented to ensure this type of breach would not occur again in the future.

Mrs Woffendin then drew attention to the ongoing management of vacancies and the areas of recruitment for nurses, including the Trust's involvement in the international nurse recruitment programme.

Prof Proctor asked about the patient quality indicators and what relationship there was between this work and the quality improvement work. Mrs Woffendin reported that the indicators were being developed with Dr Kenwood and the Quality Improvement Team.

Mrs Forster Adams noted the importance of the work in the Older Adult service to determine its future needs in terms of staffing. Mrs Forster Adams noted that the figure quoted in the report of 75.5% bed occupancy was based on the total number of beds across the Trust, and the figure included those not being used due to COVID arrangements. She then explained that this was different to the figure reported in the Chief Operating Officer's report, which was based on those beds actually available for use.

Mrs White asked about the percentage overhead that was being applied and whether this was now being calculated at 24%. Mrs Hanwell advised this was part of the reset and re-basing exercise and there was more work to do to look at the ratio to ensure it was sufficient to allow capacity for staff to carry out other essential duties such as training.

Mrs White also asked about safe staffing in community settings and how this was being monitored. Mrs Woffendin advised there had been challenges in community teams due to the impact of the management of the pandemic and this was something the Safer Staffing Team could look at for the next 6-month report.

CW

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

22/016 **The use of the Trust seal** (agenda item 15)

The Board noted that the Trust seal had been applied as follows:

- Log 126, Sub-contractor's (G&H appointed by Tilbury Douglas)
Collateral Warranty relating to Red Kite View at St Mary's Hospital,
Leeds

The Board **noted** that the seal had been used since the last meeting.

22/017 **Any other business** (agenda item 16)

There were no other items of business.

22/018 **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 11:45 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.