

**Minutes of the Public Meeting of the Council of Governors
held on Tuesday 5 July 2022 in the View Room, The Studio Leeds, Riverside
West, Whitehall Road, Leeds, LS1 4AW**

PRESENT:

Dr Sue Proctor – Chair of the Trust (Chair of the meeting)

Public Governors

Nicola Swan
Peter Webster

Carer Governors

None

Service User Governors

Rachel Gibala
Joseph Riach

Executive Directors

Dawn Hanwell
Dr Chris Hosker
Sara Munro
Darren Skinner

Staff Governors

Ian Andrews
Ruth Grant
Gail Harrison
Andrew Johnson
Sally Rawcliffe-Foo

Appointed Governors

Cllr Claire Douglas
Helen Kemp
Tina Turnbull
Fiona Venner

Non-Executive Directors

Cleveland Henry
Merran McRae
Sue White
Martin Wright

IN ATTENDANCE:

Kieran Betts – Corporate Governance Assistant
Rose Cooper – Corporate Governance Officer
Dr Frances Healey – Associate Non-executive Director
Cath Hill – Associate Director for Corporate Governance
Rashpal Khangura – Director at KPMG (agenda item 15)
Kerry McMann – Corporate Governance Team Leader
Ben Watson – Communications and Marketing Manager

22/040 Welcome and introductions (agenda item 1)

Dr Sue Proctor opened the meeting at 1.00pm and welcomed everyone.

22/041 Apologies (agenda item 3)

Apologies were received from the following governors: Caroline Bentham (Carer Governor), Mark Clayton (Carer Governor), Rita Dawson (Service User Governor), Les France (Public Governor), Oliver Hanson (Clinical Staff Governor), Peter Holmes (Service User Governor), Steve Howarth (Public Governor), Mussarat Khan (Public Governor), Kirsty Lee (Public Governor), Sayma Mirza (Appointed Governor), Ivan Nip (Public Governor), David O'Brien (Public Governor) and Bryan Ronoh (Carer Governor).

The meeting was not quorate.

Apologies were received from the following Board members: Prof John Baker, Non-executive Director; Joanna Forster Adams, Chief Operating Officer; Helen Grantham, Non-executive Director; Kaneez Khan, Associate Non-executive Director and Cathy Woffendin, Director of Nursing, Quality and Professions.

22/042 Changes to any declaration of interests and declaration of any conflicts of interest in respect of agenda items (agenda item 4)

No governor indicated a change to their declared interests or declared any conflict of interest in respect of agenda items.

22/043 Annual Declarations for Governors (agenda item 4.1)

Sue Proctor reminded the governors who had not yet returned their declaration form to the Head of Corporate Governance, to do so as soon as possible. The Council noted that the outstanding declarations would be reported to the next meeting in November 2022.

The Council **received** and **noted** all interests declared by governors.

22/044 Minutes of the public Council of Governors' meeting held on the 5 May 2022 (agenda item 5.1)

The minutes of the public Council of Governors' meeting that was held on the 5 May 2022 were **approved** as a true record.

22/045 Endorsement of the decisions made at the Council of Governors' meeting held on the 5 May 2022 (agenda item 5.2)

Sue Proctor advised the Council that the meeting held on the 5 May 2022 was not quorate and therefore, the Council was asked to endorse the decisions agreed at that meeting. However, it was noted that this meeting was also not quorate because of the total number of governors present, service user, carer, and public governors were not in the majority.

It was agreed that a request to endorse the decisions made at both the May and July meetings would come to the November meeting. All governors would be contacted and reminded of the importance of attending these meetings and asked how they could be further supported to attend in the future.

**RC /
KM**

The Council **noted** the process that would be followed to endorse the decisions made at the May and July meetings.

22/046 Matters arising (agenda item 6)

There were no matters arising.

22/047 Cumulative action log – actions outstanding from previous public meetings (agenda item 7)

Sue Proctor presented the cumulative action log, and the Council agreed the actions reported as complete. Tina Turnbull flagged a missing action in the May 2022 minutes regarding her request to be put in touch with a member of staff from the Learning Disability Service. Sue Proctor asked for this to be noted and actioned.

RC

The Council **received** the cumulative action log.

22/048 Chair's Report (agenda item 8)

Sue Proctor presented the Chair's Report and highlighted a few key areas for the Council to note. Firstly, she welcomed the two new appointed governors: Sayma Mirza (Director for Children and Families Programme, West Yorkshire and Harrogate Integrated Care System) and Cllr Claire Douglas (City of York Council).

Sue then noted that this was the last meeting for some governors. Peter Webster, Niccola Swan and Steve Howarth had come to the end of their terms of office; Mussarat Khan and Ruth Grant had both decided not to stand for election at the end of their terms of office; and Sally Rawcliffe-Foo was leaving the Trust and would no longer be eligible to be a staff governor and was therefore stepping down from the

Council. Sue thanked all the governors mentioned on behalf of the Council for their hard work and dedication and to those governors who were eligible to stand again, she hoped that they decided to join us for another term of office at some point in the future. Sue also noted that since the last meeting Hazel Griffiths, a carer governor representing York and North Yorkshire, had stepped down from the Council and she thanked her for her contributions during her time as governor.

Finally, Sue reminded governors that the Trust was currently holding elections to the vacant seats on the Council and the results would be declared on the 22 July 2022.

The Council **noted** the report from the Chair of the Trust.

22/049 Chief Executive Report (agenda item 9)

Sara Munro introduced the Chief Executive Report which included Covid-19 updates; key updates on the Trust's strategic objectives such as the People Plan, Care Services, and Estates; and updates on partnership working arrangements relating to the Integrated Care Board and the Leeds Place Based Partnership.

Sara noted that Covid-19 rates were rising in the general population, and the Trust had seen a slight increase in cases because of this. However, she assured the Council that this was being managed and the disruption was minimal due to the Trust's robust infection prevention and control measures, and they would continue to manage the situation based on the latest data.

Sara informed the Council that Integrated Care Boards (ICB) became legal entities on the 1 July 2022 and the Leeds Office of the West Yorkshire ICB held delegated authority from West Yorkshire to continue to develop and deliver the health and care strategy for Leeds and manage the NHS resources. Sara was pleased to note that Cllr Rebecca Charwood, former Chair of the Leeds Health and Wellbeing Board and governor on the Trust's Council, had been appointed as the Independent Chair of the Leeds Place Based Partnership.

The Council **received** the report from the Chief Executive and **noted** the updates provided.

22/050 Lead Governor Report (agenda item 10)

On behalf of Les France and the rest of the Council, Sue Proctor said thank you to Peter Webster, Niccola Swan, and Steve Howarth, who throughout their time as governors had made a significant contribution, undertaken additional responsibilities and been a 'critical friend' to the Trust. Sue then presented Niccola, who had served nine years, and Peter, who had served six years and been Lead Governor for two and a half of those years, with end of service certificates. As Steve was not present, arrangements would be made to post his certificate to his home address.

The Council **received** the report from the Lead Governor.

22/051 Quarterly Quality and Performance Update Report (agenda item 11)

The Council received the report which outlined the Trust's performance as of March 2022. The Council then divided into smaller groups to discuss the report in more detail before sharing their reflections and directing questions to members of the Board as appropriate.

Firstly, Cllr Venner referred to the workforce metrics and in particular staff sickness figures, noting that the highest percentage related to mental health and stress and asked how our data benchmarked against other Trusts. Darren Skinner explained that sickness due to mental health and stress was sometimes home rather than work related. He informed the Council that they had recently introduced a mental health pathway to ensure that staff received an immediate referral to Occupational Health along with access into counselling. This had received positive feedback and was part of the wellbeing conversations that managers were encouraged to have with their staff. Darren then confirmed that the Trust's stress related sickness figures benchmarked similarly to other organisations. Sue White was encouraged to note that performance relating to the completion of wellbeing assessments was at 80% as this showed an understanding of staff health and wellbeing needs.

Helen Kemp noted that staff appraisals performance was low and asked what the plan was to address this. Darren acknowledged that performance had dropped and explained that this was directly related to staffing pressures. The Council noted that action plans were in place to address the current position and the team had also introduced a new appraisals system which encouraged more meaningful development conversations between staff and their managers. Merran McRae also provided some assurance on behalf of the Workforce Committee where the issue of appraisals was discussed regularly in detail. She explained that the Committee would be tracking the impact of the new appraisal system, which they expected to make a positive impact over the next few months. Sue Proctor added that workforce issues such as these were monitored through the People Plan and encouraged governors to observe the Workforce Committee where progress against the Plan was scrutinised.

Cllr Venner referred to the crisis response statistics in the service performance section of the paper. She noted that the percentage of Section 136 referrals assessed within three hours of arrival was around 10 to 15% in the period covered by the report and had no target attached to it. She asked why this figure was so low and what the Trust's expectation was around this. She also noted that the target for the number of Section 136 detentions over 24 hours was zero, but in March 2022 this was as high as 16. She also suggested that the Trust monitored the number of times people were detained under Section 136 of the Mental Health Act outside of the Section 136 suite at the Becklin Centre (for example at police stations).

Chris Hosker explained that the three-hour target in the report was not a national target and was well below the 24-hour requirement, but they did endeavour to see

people as quickly as possible. He also outlined some of the challenges associated with assembling the team to carry out the individual Mental Health Act assessments. He acknowledged that the figures relating to the number of Section 136 detentions over 24 hours was more concerning and was likely a result of Covid-19 pressures. He explained that some work had been done with the local authority to ensure that doctors were released to do Section 136 assessments as a priority. He also advised that very few people would be detained under Section 136 outside of the Section 136 suite.

Cllr Venner requested further information about the percentage of Section 136 referrals assessed within three hours of arrival and asked when the counting of the three-hour period started. Sue Proctor asked that this question was answered outside of the meeting. Sue also noted that there was an item on the Council of Governors' forward plan relating to the Trust's Section 136 suite and crisis services more generally which she asked to be scheduled for an upcoming meeting.

JFA

Helen Kemp then asked about plans to reduce the Gender Identity Service (GIS) waiting list and Cleveland Henry discussed a paper recently received by the Finance and Performance Committee which set out the impact of the Trust's additional investment to support the GIS reset plans and waiting list management. Cleveland noted that some improvements had been made to the waiting list position but there was still a significant way to go if referrals continued at the current rate.

Sara Munro then discussed physical health checks performance and the extra investment at a national level which was aimed at tackling health inequalities and improving outcomes for people with serious mental illness from a physical health point of view. She explained that as part of the money that was allocated to the Leeds system, they had recently agreed to invest in specific posts to support the uptake of physical health checks by people with serious mental illnesses. Chris Hosker added that the Trust had recently signed off the new Physical Health Improvement Procedure and a new version of the CareDirector form for inpatient physical health checks had been developed which would streamline the process.

Tina Turnbull raised a point around developing proactive rather than reactive metrics relating to effectiveness which would help us to prepare the relevant data sets for Population Health Boards. Sara Munro explained that this was a live conversation across all health and care partners in Leeds and they were looking at every domain including clinical effectiveness and evidence-based practice and tracking the impact in terms of outcomes across all services. Sue Proctor suggested adding an item to the forward plan for the September Board to Board around Leeds and York 'place' systems and priorities and the implications and opportunities for the Trust.

**SM /
RC**

Cllr Douglas noted that for those admitted to the Children and Young People's Mental Health Service (CYPMHS) the target for assessment within seven days was 100% but in March 2022 performance was at 26.7%. She asked why this was the case and what impact this was having. Sara Munro explained that Red Kite View had only been fully occupied since March 2022, so it was expected that data from next quarter would show improvements in the types of metrics and data trends. She went on to explain that specific metric referred to the Health of the Nations Outcome Scale (HoNOS) which was a particular type of outcome measure to be completed

within seven days of admission. It was a national requirement and performance varied throughout the year for a number of reasons, but she assured the Council that this had no impact on the quality of care provided. The Council also noted that the Quality Committee would be doing further work to understand the CYPMHS inpatient data and the nature of referrals and needs of the service. There was also an ongoing conversation at Trust and Provider Collaborative Board level about developing more meaningful CYPMHS metrics.

Ian Andrews flagged a concern around the potential for Covid-19 risk fatigue amongst some staff and suggested reiterating the importance of infection prevention and control measures via staff communication channels. Sara explained that they were currently putting plans in place to prepare for winter at a Trust and system level and involving staff with these campaigns both in terms of Flu vaccinations and Covid-19 booster jabs.

Ian Andrews also highlighted the significant vacancy figures in junior nursing roles and asked what impact this was having both on the senior members of staff and the service provision. Sue Proctor responded that this was an area of constant scrutiny at system level, and they were fully cognisant of the supply chain issues which were a national problem. Sue Proctor assured the Council that Cathy Woffendin was involved in active work to encourage second and third year placement students to come and work for the Trust with the offer of a two year period of preceptorship which aimed to develop confident and qualified nursing staff. The Council noted that data relating to staff retention was regularly reviewed by the Workforce Committee.

Ian Andrews also pointed out that there were no figures for non-clinical staff performance as per his request from a previous meeting. Rose Cooper would revisit this action with the relevant people.

RC

Joseph Riach noted that the target for the percentage of appropriate crisis referrals seen face to face for assessment within four hours was 90% but had dropped to as low as 37.5% in February 2022. Chris Hosker responded that this reflected the strain that service was under at that period due to Covid-19 pressures which meant it had been unable to meet the target. Joseph also asked for more information about the percentage of Acute Liaison Psychiatry Service (ALPS) referrals responded to within one hour. Chris Hosker explained that ALPS covered the emergency departments at both St James' Hospital and Leeds General Infirmary, and he highlighted some challenges with meeting the one-hour target whilst working across two sites.

Joseph Riach questioned how readable some of the data in the Quarterly Quality and Performance Update Report was, and it was agreed that this would be factored into the refresh of the report which would be undertaken by the new Head of Performance once they were in post.

The Council **noted** the Quarterly Service Delivery and Performance Report.

Andrew Johnson joined the meeting. Rashpal Khangura joined the meeting virtually.

22/052 Auditor's Report on the Annual Accounts (agenda item 15)

The Council received the Auditor's Annual Report which provided a summary of the findings and key issues arising from their 2021-22 audit of the Trust. Rashpal Khangura delivered a presentation which outlined the scope of work that had been undertaken. This included the financial statements audit which gave an unqualified (satisfactory) opinion and an assessment of the Trust's value for money arrangements where no significant weaknesses had been found.

Rashpal explained that the requirements regarding the Quality Report were removed at the start of the pandemic in Spring 2020 and had not returned as a mandatory requirement and KPMG no longer had any responsibilities regarding this. Tina Turnbull asked about the future of auditing around quality and what steps the Trust should consider if it was not formally reinstated. Rashpal outlined some of the options in terms of external scrutiny and benchmarking and Sue Proctor assured the Council that the Trust continued to produce an Annual Quality Report which was scrutinised by the Quality Committee and presented to the Board of Directors.

The Council **received** the Auditor's Report and **noted** the information and assurance provided.

Rashpal Khangura left the meeting.

22/053 Update on findings from the outcomes work (agenda item 12)

Chris Hosker delivered a detailed presentation on the aims of the clinical outcomes project, the services involved so far, progress to date, provisional findings and next steps. Chris explained that the project was being delivered in partnership with the Institute for Healthcare Improvement (IHI) and an external progress review was being carried out by Dr Eivind Brandt, clinical psychologist with the Harvard School of Public Health.

Tina Turnbull asked for some assurance around what connections were being made between the Trust's clinical outcomes work and the wider system in Leeds, both in terms of mental health and learning disability services. She highlighted the importance of joined up working to ensure we learn from what already exists in the system and to make it as accessible as possible. Gail Harrison explained that work was being done at a Leeds Population Board level but acknowledged there was more to do to strengthen the partnership arrangements.

Niccola Swan asked for more detail around the individual measures being used, the process for developing these and what level of investment and commitment existed to take this forward. As an example, Chris Hosker provided an update on progress with developing outcome measures for the Community Working Age Adult Service. He explained that they had tested a system called DIALOG which had been well received. However, there were some challenges following the impact of the community transformation work, and what outcome measures were mandated by NHS England. He explained that progress had been temporarily paused while the

ICS awaited clarification on which and how many outcome measures could be used. Once this had been confirmed and the infrastructure was in place, this service would continue into the next cycle for further testing.

The Council received assurance that the outcomes work was a priority for the Trust and there was significant commitment at Board level as part of the Executive Directors' objectives, and the Council of Governors' work programme. Sue Proctor highlighted the importance of maximising on the current level of clinical engagement and traction. Chris Hosker then explained that as part of their support package the IHI have trained Trust staff to carry out the 90-day learning cycles independently. The need for further investment to support the implementation stages and sustain the project beyond that point would be monitored.

Rachel Gibala then shared her perspective from a service user point of view around the types and frequency of questionnaires used to measure outcomes and the toll these may take on the individual being asked to complete them. She suggested that the latest version of the form was made available to the person to work from and compare against. Chris Hosker thanked her for the suggestion and agreed to look into this further. He then highlighted the importance of service user engagement and ensuring the process was a meaningful and positive experience for those involved.

CHos

It was agreed that an update on progress with the clinical outcomes work would be scheduled for the February 2023 meeting, along with a case study of a service which showed the process and impact in more detail.

CHos

The Council **noted** the progress so far.

22/054 Finance Update (agenda item 13)

Dawn Hanwell provided a verbal overview of the Trust's financial position at month two. She explained that the Trust had a target of achieving a £1.1m surplus over the year and was on plan to deliver this. As per the new financial regime, where trusts have one control total and a statutory obligation to collectively break even, this surplus would be used to offset some of our neighbouring organisations being in deficit.

Dawn then informed the Council that the Trust had set its internal budgets for the coming year based on historic spend and outlined some of the challenges associated with this. She explained that consideration needed to be given as to what was achievable and deliverable within the finite finance resources that were available to the Trust.

Cllr Douglas asked how the system was coping with the threat of increased energy prices. Dawn Hanwell explained that the Spending Review had been set before the inflation increase and since then there had been some renegotiation at a national level and additional funding had been provided to support trusts with non-pay inflation costs. Dawn explained the impact this had on the Trust's surplus position and how it would need to be accounted for.

The Council noted that Dawn Hanwell would provide a 'look back' on the finances over the last year at the Annual Members' Meeting in July. An update on the financial risks and opportunities associated with the new system way of working would be scheduled for the Board to Board session in September. Rose Cooper would update the action log. Cleveland Henry also encouraged governors to observe the Finance and Performance Committee where issues such as these were discussed in more detail.

DH /
RC

The Council **noted** the finance update and **considered** the key points raised.

22/055 **Audit Committee Annual Report 2021/22** (agenda item 14)

Martin Wright, chair of the Audit Committee, introduced the Annual Report for 2021/22 which described the work undertaken over the last financial year as well as provided assurance on the work of the external auditors (KPMG) who were appointed by the Council. Martin highlighted some areas that the Committee had gained assurance on which included counter fraud and the process around managing the strategic risks set out in the Trust's Board Assurance Framework.

Tina Turnbull asked whether Martin thought that the Trust's Quality Report would benefit from an external review. Martin confirmed that he supported the idea of an external review and Sue Proctor added that this may be an item for consideration at an ICS level with other mental health and learning disability service providers. Sue anticipated that further conversations would be had regarding this in due course.

It was agreed that the dates of the upcoming Audit Committee meetings would be shared with governors.

RC

The Council **received** the 2021/22 Annual Report from the Audit Committee and was **assured** of the work of the external auditors in relation to providing assurance to the Audit Committee.

22/056 **Approval of changes to the Constitution** (agenda item 16)

Cath Hill outlined the two proposed changes to the Trust's Constitution. The first was the change of the Trust Headquarters' address to St Mary's House, St Mary's Road, Potternewton, Leeds, LS7 3JX. This change was reflected in the Foreword to Annex 7, the Foreword to Annex 8, and Section 2.1 of Annex 10 relating to governor elections.

The second update was to reduce the age at which people could become members of the Trust from 16 to 13 to reflect the lower age at which service users could be treated in our children and young people's mental health units. This change would be reflected in Section 3.1.1 of Annex 9. Cath noted that the age at which a person could become a governor remained at 16 which was in line with the model core

constitution. Tina Turnbull supported this proposal and highlighted the importance of meaningful engagement with young people. Cath Hill agreed and noted that the Patient Experience Team were planning a piece of work around this.

The Council **considered** and **approved** the proposed changes to the Constitution and **noted** that these would be presented to the July Annual Members' meeting for final sign off.

The Chair of the meeting closed the public meeting of the Council of Governors of Leeds and York Partnership NHS Foundation Trust at 3.50pm. She thanked governors and members of the public for their attendance.