

**Board of Directors Meeting in Public  
On Thursday 12 January 2023 at 9:00am  
Virtual meeting held on Microsoft Teams**

<b>Present:</b>	Dr Linda Patterson OBE	Trust Chair
	Maz Ahmed	Non-Executive Director
	Kelly Barker	Interim Chief Operating Officer
	Bob Champion	Chief People Officer
	Phil Hubbard	Director of Nursing, Professions & Care Standards and Deputy Chief Executive
	Simon Lewis	Non-Executive Director and Senior Independent Director
	Alyson McGregor, MBE	Non-Executive Director
	Iain MacBeath	Director of Integration (for items 12-26)
	Chris Malish	Non-Executive Director
	Sally Napper	Associate Non-Executive Director
	Carole Panteli	Non-Executive Director and Deputy Chair
	Mark Rawcliffe	Non-Executive Director
	Dr David Sims	Medical Director
	Mike Woodhead	Director of Finance, Contracting and Estates
	Therese Patten	Chief Executive
	Tim Rycroft	Chief Information Officer
 <b>In Attendance:</b>	Anne-Marie Dorrington	Service Manager (for agenda item 3)
	Helen Robinson	Corporate Governance Manager and Deputy Trust Secretary (Committee Secretariat)
	Fran Stead	Trust Board Secretary
	Sharon Walker	Senior Oral Health Promoter - Team Lead (for agenda item 3)

Seven guests observing, including two Appointed Governors; two Staff Governors, two members of staff, and a member of the public.

**MINUTES**

Item	Discussion	Action
1855	<b>Welcome and Apologies for Absence</b> (agenda item 1)	

Item	Discussion	Action
	<p>The Trust Chair, Dr Linda Patterson OBE, opened the virtual meeting via Microsoft Teams at 9.00am. No apologies for absence had been received.</p> <p>The Board of Directors was quorate.</p>	
<p><b>1856</b></p>	<p><b>Declarations of Interest</b> (agenda item 2)</p> <p>No declarations of interest were made for this meeting.</p>	
<p><b>1857</b></p>	<p><b>Learning from Your Experience – Oral Health</b> (agenda item 3)</p> <p>The Senior Oral Health Promoter introduced the work of the Community Dental Service’s Oral Health Improvement Team, and the context in which they worked.</p> <p>Following a successful bid for funding, the team had launched the Bradford Babies Brush campaign in January 2021 within private day nurseries in priority areas. Over 400 children benefited from toothbrushing once a day within Bradford priority nurseries, which would support toothbrushing practices at home.</p> <p>Following the pilot, funding had been received from Bradford Local Authority to mainstream the successful Bradford Babies Brush pilot in priority private day nurseries within the Bradford and Airedale District. As a result, 36 private day nurseries had been recruited to take part in the programme, with a total of 52 early years practitioners accessing the training, and 1221 children benefiting from carrying out daily toothbrushing within nurseries.</p> <p>The Board congratulated the team on the well-deserved Clinical Dentistry Award which they had won for the campaign.</p> <p>It was noted that oral health had been included in NHS England’s Core20Plus5 approach to supporting the reduction of health inequalities.</p> <p>The following points were then raised by Board members:</p> <ul style="list-style-type: none"> <li>- <b>The source of the return on investment figures to be shared outside the meeting with Simon Lewis.</b></li> <li>- Compared with other parts of the country Bradford district had high levels of dental decay, and was the second worst area in Yorkshire.</li> <li>- The importance of preventative work linked to the local inequalities.</li> <li>- Improved oral health had an impact on children’s behaviour and mental health.</li> <li>- The campaigns reached out to looked after children and children not attending private day nurseries via health visitors, childminders, and the Community Dental Service.</li> </ul>	<p><b>Sharon Walker</b></p>

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	The Board thanked the team for the presentation and positive work they were undertaking.	
1858	<p><b>Questions Received</b> (agenda item 4)</p> <p>No questions for the Board had been received since the last Board meeting.</p>	
1859	<p><b>Minutes of the previous public Board meeting held on 10 November 2022</b> (agenda item 5)</p> <p>The minutes of the public Board of Directors' meeting held on 10 November 2022 were agreed as a true and accurate record, <b>subject to the amendment of Therese Patten not having been present.</b></p>	HR
1860	<p><b>Matters Arising</b> (agenda item 6)</p> <p>There were no matters arising.</p>	
1861	<p><b>Action Log</b> (agenda item 7)</p> <p><b>The Board noted the contents of the action log and agreed to close the actions that had been listed as completed.</b></p>	
1862	<p><b>Chair's Report</b> (agenda item 8)</p> <p>Dr Patterson presented her Chair's report, which covered a variety of topics.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>Noted the continuing engagement that had taken place with partners, internally at the Trust, and with the Council of Governors;</b></li> <li>• <b>Formally welcomed Chris Malish to the Board of Directors, following his appointment being ratified by the Council of Governors, with the appointment being a result of a robust recruitment campaign;</b></li> <li>• <b>Noted that Carole Panteli had been appointed as the Deputy Chair, following her appointment being ratified by the Council of Governors;</b></li> <li>• <b>Noted that Phil Hubbard had returned to her substantive role of Director of Nursing, Care Standards &amp; Professions, &amp; Deputy Chief Executive; with Grainne Eloi returning to her substantive role of Deputy Director of Nursing, Care Standards &amp; Professions, after both undertook interim appointments during the absence of Therese Patten substantive Chief Executive;</b></li> </ul>	

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	<ul style="list-style-type: none"> <li>• Supported the proposal for the Corporate Governance Team to merge the Board Nominations, and Remuneration Committee meetings, which would result in an approved Terms of Reference document being presented to the Board for ratification;</li> <li>• Welcomed the opportunity to reflect on the work of Board Committees through the annual effectiveness review process, the results of which would be presented to individual Committees, and the Board as part of the Committee's Annual Report;</li> <li>• Noted that the annual appraisals and objective setting discussions would be scheduled for the coming months;</li> <li>• Noted that work to agree the next year's work plans for the work of the Board, and the Council of Governors, would take place over the coming months; and</li> <li>• Noted the roll out of the update Triple A form, to include 'decisions made'.</li> </ul>	
<p>1863</p>	<p><b>Chief Executive's Report</b> (agenda item 9)</p> <p>The Director of Nursing, Professions &amp; Care Standards and Deputy Chief Executive presented the report which provided commentary on strategic, operational and systems issues. The report was taken as read but Mrs Hubbard highlighted the following points:</p> <ul style="list-style-type: none"> <li>• CQC Inspection Medicines Management – report not yet available, but outcome would not affect the Trust's overall rating. The CQC had commented on the smooth rollout of ePMA, and the positive nature of the teams being inspected.</li> <li>• A deep dive was being undertaken into patients absent without leave (AWOL) following an increase in the figures. Recommendations would be worked through via Clinical Board and the Quality and Operations Group meeting.</li> <li>• The Living our Values Awards were noted and celebrated.</li> </ul> <p>Mr Lewis enquired about the change to the Employee Assistance Provider, and was assured that a full procurement exercise had been undertaken, and the new provider had an enhanced offer compared to the previous provider.</p> <p>The Chief Executive informed the Board that Kirsten England, Bradford Council Chief Executive, had announced her retirement. The Trust would be involved as a stakeholder in the recruitment of her replacement, and would need to be involved with their induction. It was agreed that <b>the Chief Executive and Trust Chair would write a letter of thanks on behalf of the Board.</b></p>	<p><b>Therese Patten/ Linda Patterson</b></p>

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	<p>It was noted that the article in the Independent newspaper regarding Lynfield Mount Hospital had been omitted from the media coverage report, but it had been circulated to Board members at the time.</p> <p><b>COVID-19 Update</b></p> <p>The Director of Nursing, Professions &amp; Care Standards provided a verbal update on the Trust's response to the pandemic which included the following information:</p> <ul style="list-style-type: none"> <li>• Considerable proactive work had been undertaken prior to Winter, and services had been busy but stable throughout the festive period. The Trust had been able to support the wider system and its partners through system daily calls.</li> <li>• The expected surge in COVID-19 cases had not materialised, with just a small number of cases across inpatient areas.</li> </ul> <p>It was confirmed that the industrial action had not resulted in an increase in pressure on the Trust.</p> <p>The Trust Chair noted the work of Trust staff and praised the systems in place which helped the Trust manage crisis situations.</p> <p><b>The Board noted the Chief Executive's report, including the update on the Trust's response to COVID-19.</b></p>	
1864	<p><b>Board Assurance Framework (BAF) &amp; Supporting Organisational Risk Register (ORR)</b> (agenda item 10)</p> <p>The Director of Nursing, Professions &amp; Care Standards presented a paper which provided an overview of changes and updates to the 2022/23 strategic objectives (SO) and associated risks currently held on the Board Assurance Framework (BAF).</p> <p>It was noted that there were no changes to overall risk scores during the last month, and SO6 had been reviewed and populated. Three new high level risks had been added to the Organisational High Risk Report since the last report.</p> <p>The Director of Finance, Contracting and Estates outlined the difficulties in consolidating and scoring the Lynfield Mount risk, and acknowledged that it had not been accurately captured on the register previously. It would now be reported at place and system level.</p> <p>Mr Rawcliffe asked whether areas contributing to SO5 should also be red, such as workforce and the ability to deliver change. Mr Woodhead agreed</p>	

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	<p>with this, and it would be discussed further at the Board Development Session on 24 January 2023.</p> <p>Mr Malish enquired whether the Board had sight on if the gaps would be closed or increase over the coming months, and asked whether the ORR had been aligned with the BAF as the ORR suggested areas were improving but this was not necessarily the case. Again, this issue would be discussed at the Board Development Session.</p> <p><b>The Board of Directors:</b></p> <ul style="list-style-type: none"> <li>• <b>Noted the progress made and outstanding areas in relation to populating the SO's</b></li> <li>• <b>Noted the mitigations and controls in place to manage the risks associated with the SO's described within the BAF;</b></li> <li>• <b>Noted the proposed changes to SO6; and</b></li> <li>• <b>Supported the work to further develop the Strategic Objectives during in 2022/23.</b></li> </ul>	
<b>1865</b>	<p><b>Alert, Advise, Assure Report: Mental Health Legislation Committee held on 24 November 2022</b> (agenda item 11)</p> <p>On behalf of the Committee, Mr Lewis presented the AAA report from the meeting held on 24 November 2022. There had been no items to escalate.</p> <p><b>The Board noted the update.</b></p>	
<b>1866</b>	<p><b>Alert, Advise, Assure Report: Quality and Safety Committees held on 17 November and 15 December 2022</b> (agenda item 12)</p> <p>On behalf of the Committee, Mrs McGregor presented the AAA report from the meetings held on 17 November and 15 December 2022.</p> <p>Ms McGregor drew attention to the items for escalation from the two meetings:</p> <ul style="list-style-type: none"> <li>- Recurring issues with workforce and safe staffing, and the remaining high concern despite considerable work undertaken to address this.</li> <li>- Demand and complexity coupled with workforce issues impacting upon waits and performance.</li> <li>- High use of agency staff.</li> <li>- High numbers of out of area placements.</li> </ul> <p>Mrs Panteli commented on valuable feedback provided by the Involvement Partner regarding the re-implementation of the Smoke-free policy. It was confirmed that co-production would be at the heart of the implementation, taking learning from the ePMA model. All impacted would be consulted, but the policy ultimately had to be clinically safe. Proactive work was being put in place before people were admitted to hospital, with nicotine replacement products available at the point of assessment in the community.</p>	

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	<p>The large amount of assurance received by the Committee was noted.</p> <p><b>The Board noted the updates.</b></p>	
<p><b>1867</b></p>	<p><b>Closed Cultures Report</b> (agenda item 12.1)</p> <p>The Director of Nursing, Professions &amp; Care Standards presented a report which provided Board with an overview of recent quality assurance activity also received by the Quality and Safety Committee December 2022.</p> <p>It was noted that it had been important to be visible out of hours as well as within hours, and such visits would be continued. It was suggested that this approach may also be considered for Go See visits.</p> <p>The recommendations would be implemented during the next year and would be monitored through the Care Quality and Operations Meeting and Senior Leadership Meeting.</p> <p>Mr Lewis shared a link to the CQC definition of a closed culture.</p> <p>The Chief Executive commented on an excellent piece of work, with inclusive methodology having been used.</p> <p>In relation to the business case for the introduction of a senior leader on every night shift, Mrs Hubbard clarified that this would be for an additional clinical manager in order for rotation across nights to be possible, enhancing leadership to enable senior cover across 24 hours a day.</p> <p><b>The Board of Directors:</b></p> <ul style="list-style-type: none"> <li>• <b>Took assurance from the Trust’s response to recent media concerns about closed cultures and the approach to addressing this.</b></li> </ul>	
<p><b>1868</b></p>	<p><b>Care Quality Commission Update and Developments</b> (agenda item 13)</p> <p>Mrs Hubbard presented the report which provided an overview of recent CQC activity that was not held within other reports.</p> <p>Mrs Hubbard highlighted that an engagement meeting had taken place since the report had been written, and no concerns had been raised. Once a new inspection manager had been recruited the Board would be informed.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>Noted the initial positive feedback from the Medicines optimisation pilot</b></li> </ul>	

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	<ul style="list-style-type: none"> <li>• <b>Noted the position with the Trust’s ongoing relationship with the CQC.</b></li> </ul>	
<b>1869</b>	<p><b>Integrated Performance Report</b> (agenda item 14)</p> <p>The Director of Finance, Contracting and Estates presented the report and summarised the items that had been considered and escalated through the relevant governance groups.</p> <p>Mr Woodhead referred to the delay in opening the crisis beds, which had had an impact on out of area placements. This had now been escalated and an alternative provider had been sourced so it was anticipated that improvements would be visible in this area in Quarter 4.</p> <p>It was agreed that <b>benchmarking information in relation to sickness levels would be helpful in the report.</b></p> <p>A discussion took place on the current performance management framework in place at the Trust, noting the successes and areas identified for further development. Discussions around metrics and strengthening the performance monitoring approach would be held at the Board Development Session, which would result in revisions being made to the Trust oversight and assurance framework, including the Integrated Performance Report.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>Considered the key points and exceptions highlighted for November 2022 and noted the proposed actions;</b></li> <li>• <b>Considered any further attention via supporting Board Committee structures.</b></li> </ul>	<p><b>Bob Champion</b></p>
<b>1870</b>	<p><b>Staff Survey 2022 – Progress Update</b> (agenda item 15)</p> <p>The Chief People Officer presented a report which summarised progress on the NHS Staff Survey 2021 results dissemination and action; and outlined the delivery of the NHS Staff Survey 2022, with a summary of response rates, and an outline of proposed reporting of the substantive results.</p> <p>Mr Champion explained that the results were currently under embargo and couldn’t be shared outside of the Trust, but a full results summary would be delivered to the Board in March or April 2023 – depending on lifting of the NHS embargo.</p> <p>The Trust’s response rate had been 41%, compared with 45% in the previous year’s survey. Mr Ahmed commented on this, and asked what mechanisms for listening to staff existed outside the survey. Mr Champion stated that the response rate was not showing a declining trend as the previous year’s rate had been an increase. He outlined the number of incentives, rewards and</p>	



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	<p>reminders that had been in place for the survey. Environmental factors, such as industrial action and the cost of living crisis may have had an impact on staff engagement.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>Noted the progress on the response to NSS2021, the update on the delivery of NSS2022 and the proposed reporting schedule.</b></li> </ul>	
<b>1871</b>	<p><b>Alert, Advise, Assure Report: Workforce and Equality Committee held on 20 October 2022</b> (agenda item 16)</p> <p>On behalf of the Committee, Mr Rawcliffe presented the AAA report from the meeting held on 20 October 2022. He reported that had been two items to escalate:</p> <ul style="list-style-type: none"> <li>- Concerns around the key performance metrics</li> <li>- Implications of the workforce for 2023/24 financial planning</li> </ul> <p>Strong triangulation would continue between the Workforce and Equality Committee, the Finance, Business and Investment Committee and the Finance team, and this would be a key area of focus at the Board Development Session on 24 January 2023.</p> <p>Mr Rawcliffe drew attention to the Apprenticeship Levy Update, highlighting current plans for a fuller utilisation of the resources and the phasing of activities. This would remain a key focus of activities and was fundamental to the success of the workforce plan.</p> <p>The Chief Executive drew attention to the recent Patient and Carer Race Equality Framework for Mental Health Trusts, from which work would be assigned to the Workforce and Equality Committee.</p> <p><b>The Board noted the update.</b></p>	
<b>1872</b>	<p><b>Alert, Advise, Assure Report: Finance, Business and Investment Committee held on 24 November 2022</b> (agenda item 17)</p> <p>On behalf of the Committee, Mr Ahmed presented the AAA report from the meeting held on 24 November 2022. Mr Ahmed highlighted the alert around the financial picture for future years. He stressed that the Committee had not yet received sufficient assurance on the deliverability of transformation workstream initiatives or the associated financial savings.</p> <p>Mr Ahmed also flagged a concern regarding the ongoing operational viability of the Lynfield Mount site given the ongoing delays and uncertainty surrounding capital for the redevelopment. The Quality and Safety Committee would review an assessment of the clinical and patient safety aspects. Mrs</p>	

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	<p>Panteli added that it would be useful to have more granular information regarding the impact of the estate on clinical safety and quality. It was suggested that <b>a joint Committee be arranged between Quality and Safety, Workforce and Equality, and Finance, Business and Investment Committees focussing on Lynfield Mount Hospital, and the Director of Nursing, Professions &amp; Care Standards committed to discussing this further with the Director of Finance, Contracting and Estates, the Medical Director and the Interim Chief Operating Officer outside the meeting.</b></p> <p>The Board noted the update.</p>	<p><b>Phil Hubbard/ Mike Woodhead/ David Sims/ Kelly Barker</b></p>
<p><b>1873</b></p>	<p><b>Alert, Advise, Assure Report: Charitable Funds Committee held on 27 October 2022</b> (agenda item 18)</p> <p>On behalf of the Committee, Mr Rawcliffe presented the AAA report from the meeting held on 27 October 2022. He reported that there had been two alerts:</p> <ul style="list-style-type: none"> <li>- The ongoing financial viability of the Charity given external factors and reduced fundraising activities, and</li> <li>- Implementing Ambassadors to promote, advocate and ideation generation for funding opportunities.</li> </ul> <p>Mrs McGregor asked whether the Charity looked for gifts in kind, and Mr Woodhead advised that this was included in funding applications.</p> <p>The Board noted the update.</p>	
<p><b>1874</b></p>	<p><b>Finance Report</b> (agenda item 19)</p> <p>Mr Woodhead provided an overview on the financial performance for Month 8, for both the Trust and the Integrated Care System (ICS).</p> <p>Mr Woodhead highlighted that the financial position continued to look favourable with a year to date surplus position of £593k which was £56k better than plan. The forecast for the year was a breakeven position which was as planned, but it was noted that this was reliant on £5.2m of non-recurrent measures. If the ongoing costs of COVID-19 were factored in, the underlying position was closer to a £11m deficit. Plans to address this deficit would be discussed at the Board Development Session on 24 January 2023.</p> <p>Mr Woodhead drew attention to the increasing likelihood that the Trust would need to contribute to achieving a financial balance at Place level.</p> <p>The Chair referred to the new money announced during Quarter 3 by the Government for social care support and discharges, although the grant conditions were not yet known.</p>	

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	<p>Mr Woodhead reassured the Board that processes were in place to meet the planning timescales. A first draft of the plan would be shared at the Private Board meeting in February 2023, and the final draft at the Private Board meeting in March according to the current timescales.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>Noted the year to date forecast financial position of the Trust and the ICS; and</b></li> <li>• <b>Did not highlight any further assurances required.</b></li> </ul>	
1875	<p><b>Division of Responsibilities – Chief Executive and Chair</b> (agenda item 20)</p> <p>The Trust Board Secretary advised that a review and re-presentation exercise of the division of responsibilities had taken place following the substantive appointment process for the Chair of the Trust.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>Noted that the Trust document had been updated in response with the substantive appointment being made to the Chair of the Trust role, and that the individual responsibilities of the Chair and Chief Executive as outlined in the paper remained as agreed Spring 2022; and</b></li> <li>• <b>Noted that the document would be reviewed and updated as required with any interim / substantive changes associated with the roles.</b></li> </ul>	
1876	<p><b>Updated MHLDA Committees in Common Terms of Reference</b> (agenda item 21)</p> <p><b>The Board noted the changes to the Mental Health, Learning Disability and Autism (MHLDA) Collaborative’s terms of reference for the Committees in Common (CinC).</b></p>	
1877	<p><b>Board of Directors Public Meeting Annual Work Plan</b> (agenda item 22)</p> <p><b>The Board reviewed the Private Board Work Plan for 2022/23.</b></p>	
1878	<p><b>Notification of Future Public Meeting Dates</b> (agenda item 23)</p> <p><b>The Board noted the future public meeting dates for 2023/24.</b></p>	
1879	<p><b>Any Other Business</b> (agenda item 24)</p> <p>Mr Lewis asked about the relevancy to the Trust of virtual wards after hearing a recent radio discussion about them. Mr MacBeath stated that as a result of the Local Authority’s financial position it was looking to withdraw some funding from intermediate care beds, and virtual wards could be integrated with the</p>	

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	Trust's services but would need to be run by the Local Authority and community services rather than the acute Trust.	
1880	<p><b>Comments from Public Observers</b> (agenda item 25)</p> <p>An Appointed Governor who had observed the meeting stated that in relation to the Oral Health agenda item, he was interested in whether any work was taking place regarding the oral health of local disadvantaged communities and Muslim students in particular. Dr Sims stated that in addition to the work of the Oral Health Team, the Born In Bradford programme was aiming to reduce inequalities and the health gap, and this would include all aspects of the school climate including young peoples' mental health, oral health and physical exercise.</p>	
1881	<p><b>Meeting Evaluation</b> (agenda item 26)</p> <p>The Trust Chair thanked all colleagues for their contributions to the meeting. It was agreed that it had been positive to have members of the public and Governors at the meeting. Time management had been good, along with well organised and high quality reports. Suggested improvements could be reviewing IT arrangements as there had been some sound issues. The meeting was closed at 11.13am.</p>	

**Signed:**

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**Dated:**

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