

Minutes of the Public Meeting of the Trust Board

28th May 2024, 9.30am-1.00pm

Meeting held virtually via MS Teams

Present:

Crishni Waring, Chair
 Faisal Hussain, Non-Executive Director/Deputy Chair (Chairing meeting)
 Ruth Marchington, Non-Executive Director
 Josie Spencer, Non-Executive Director
 Alexander Carpenter, Non-Executive Director
 Hetal Parmar, Non-Executive Director
 Liz Anderson, Non-Executive Director
 Angela Hillery, Chief Executive
 Sharon Murphy, Director of Finance
 Bhanu Chadalavada, Medical Director
 Anne Scott, Director of Nursing, Allied Health Professionals and Quality

In Attendance:

Sam Leak, Director of Community Health Services
 Tanya Hibbert, Director of Mental Health
 Helen Thompson, Director Families, Young People & Children Services and Learning Disability and Autism Services
 Sarah Willis, Director of Human Resources and Organisational Development
 Alison Gilmour, Director of Strategy and Partnerships (on behalf of David Williams)
 Kate Dyer, Director of Corporate Governance
 Kamy Basra, Associate Director of Communications and Culture
 Sonja Whelan, Corporate Governance Coordinator (Minutes)

TB/24/063	<p>Apologies for absence: Apologies for absence were received from David Williams and Paul Sheldon, and Jean Knight (who was called away four minutes into the meeting). The Chair welcomed Alison Gilmour (deputising for David Williams).</p> <p>Several Allied Health Professional Fellows and a General Management Trainee were observing the meeting via the LiveStream function.</p>
TB/24/064	<p>Community Health Services – Single Point of Access (SPA) Team Sam Leak introduced the Single Point of Access (SPA) Team who work within Community Health Services (CHS) and invited members to introduce themselves.</p> <ul style="list-style-type: none"> <p>Service Presentation The service presentation was delivered by Debbie Ridley (Service Manager), Geraldine Hirscher (Operational Manager) and Abbie Woodhouse (Operational and Transformation Lead). Debbie Ridley explained that SPA acted as a single point of contact for all referrals and queries for a range of services within CHS. The service was based at New Parks Health Centre and operated between the hours of 7.15am to 10.00pm, 365 days per year.</p>

The service takes a range of calls from patients, GPs, UHL and many other professionals. When receiving calls, the SPA call handler will refer to an algorithm to determine the required response and task to the correct team in the community. It was noted there was a number of wide-ranging services that refer into SPA.

Abbie Woodhouse informed the Board of the following data for April 2024:-

- 20,501 calls into the service;
- 19,866 (97% of all calls received) were answered with 86.3% being answered within 30 seconds;
- The longest call wait time was 13 minutes but this was due to 50% of staff attending a team meeting;
- 7,665 e-referrals processed the same day;
- 71 referrals received from NHS 111 colleagues;
- 1,914 emails processed the same day;
- 29,516 total contacts in April 2024.

The transformation work taking place within SPA was then described. One of the projects, called the Access Project, was looking at different ways of accessing community health services as although the service is called Single Point of Access, it was not the only contact point. The team are benchmarking nationally against other SPAs with the ultimate goal of expanding technology to better enable accessibility to every patient, carer and family member that needs to make contact; thus reducing health inequalities.

SPA into Triage was another project and had arisen following an incident. This project involved process mapping the whole pathway from calls received to nurses seeing patients. Several actions had been taken as a result; the biggest change was to introduce a process where the system recognises when multiple calls are received and sends an alert which is then escalated to the senior nurse in charge.

Geraldine Hirscher described her journey and experience within SPA and was very proud of the staff and service; a service which had continually developed, grown and evolved. Through Covid-19 the service operated as usual from the office and was available to service users as the 'front door' to Leicestershire Partnership NHS Trust (LPT) providing compassionate support during such a challenging time.

The work environment was busy, demanding and fast paced but the team always ensured time out was taken to celebrate successes. The admin roles are entry level and seen as a stepping stone into the NHS which was positive in terms of growing our own but meant high staff turnover was a challenge for the service. However, the SWAP (Sector based Work Academy Programme) is a 4-week course delivered by Leicester College and supported by Job Centre Plus, for those wanting to join the NHS and where Geraldine Hirscher has attended every month to give a presentation on the benefits and range of roles that LPT has to offer; with SPA having seen success from this programme.

Staff work long shifts to cover the service operating hours and the emotional impact from call volume and the nature of some calls taken was acknowledged. A working from home pilot was currently in place and initial

feedback from staff had been positive and supported the work/life balance and health and wellbeing of staff. In addition, a course to provide support with emotional resilience had been sourced via LOROS. A listening into action event had taken place in December 2023 where gaps had been identified and consequently training and inductions had been improved, the 90 day toolkit was now fully embedded in SPA, peer support and reflection sessions had been implemented as well as other staff initiatives.

The future for SPA included the continuation of the access project; a pilot was about to start with the podiatry team and taking their out of hours calls and the further roll-out of working from home and/or blended working to more SPA staff as it was felt this would improve staff retention and quality of staff working lives.

The Chair thanked the team for their presentation and remarked on the staggering numbers quoted around volume of calls and how efficiently these were dealt with. Ruth Marchington was impressed with the system change following an incident and congratulated the team on their transformation project work.

Angela Hillery was impressed with the leadership example of valuing staff and felt it would be good to share at the Senior Leadership Team meeting. Also, as the health and wellbeing executive sponsor for Our Future Our Way, commented on the need to continually focus on differentiating the needs of different teams as this was clearly a challenge.

Crishni Waring echoed the thanks offered and was pleased to hear the reference to health inequalities and making sure people can access services.

Bhanu Chadalavada was struck by the escalating situation when receiving multiple calls and ensuring all risks are managed. He asked how service user feedback was used to make any changes in the system. Geraldine Hirscher responded that the service did not directly take service user feedback because SPA serves 14 different teams and this caused confusion about which team was providing which service, however, the possibility of adding a message at the end of calls to receive instant feedback was being considered.

Liz Anderson asked if there were any gaps in the service and whether the team needed any help in raising its profile. Abbie Woodhouse replied that SPA information was contained in patient information leaflets and the trust website but acknowledged promotion of SPA was still required. Hetal Parmar further asked if there was any more the Board could do to support SPA both in general and in terms of the service genuinely becoming the single point of access. In response, Geraldine Hirscher believed the service could be the single point of access for community health services and beyond as the foundations are in place and was really keen to grow and develop the service. Sam Leak added that work was ongoing to look at SPA in UHL aligning with SPA in LPT to offer more of a system-wide SPA and the transformation work was moving in that direction.

The Chair once again thanked the team on behalf of the Board for their energy, passion, continuous learning and transformation.

- **Patient Voice**

The patient voice item was delivered by Andy Murtha (Lived Experience Partner) and Tracy Yole (Deputy Head of Nursing). Andy Murtha explained how he had volunteered the previous year to join a student community nurse in redesigning resources for type 2 diabetics using insulin and how his lived experience helped with this. Tracy Yole described how this initiative started as part of an insulin quality improvement workstream where a student community nurse was passionate about taking a step further in supporting people to live well with their diabetes. Together with Andy they developed some easy read, self-help and self-care leaflets. It was quickly realised how the self-care message needed to start at the beginning of a patients journey and this was when the connection was made with SPA and the wider transformation work taking place. As a result, the message of self-care and LPT being committed to supporting all patients in managing their own conditions, runs from SPA into all services. Andy's insight into the challenges of somebody with complex health conditions and input had been invaluable.

The Chair thanked Tracy Yole and especially Andy Murtha for getting involved as a volunteer and sharing his lived experience in particular speaking about something so personal to the board.

Angela Hillery was encouraged to hear of the continual improvement which was so important.

Josie Spencer asked about individuals who do not feel motivated to take on self-care and how to support them particularly given health inequalities around diabetes. Andy Murtha has been a key part of helping and supporting to understand the challenges and the team has been working on a vast array of resources that can help with self-care in its broadest sense and a whole suite of resources is being developed to support this.

Bhanu Chadalavada reflected on training for junior doctors, one session of which was on diabetes and given the increase in diabetes as a comorbidity in mental illness but also how some medications increased the risk of diabetes, proposed the service join the training sessions to help aid early discussions when junior doctors undertake ward rounds and would connect with the service via email outside of this meeting.

Anne Scott shared what she had learned from Andy Murtha at the International Nurses Day Conference about Florence Nightingale probably being one of the first lived experience 'famous' people and added the trust had a lot to learn from lived experience partners and offered her personal thanks. This was echoed by board members.

- **Staff Voice**

Sandeep Heran (SPA Team Leader), Rupert Walker (SPA Service Co-ordinator) and Abena Oppon (SPA Service Co-ordinator) were all in attendance for this item and shared their experiences and insight. Sandeep Heran had been with SPA for 6 years and his role entailed overseeing referrals for community patients, managing referral queues and managing a team of 10-12 service coordinators. Rupert Walker was a service

coordinator and gained his role in SPA via the Leicester College SWAP course. Training and resources were given to him during his induction and he enjoyed the patient interaction and learning about the great work of LPT. Abena Oppon had been with SPA for 6 years and was part of the current working from home pilot. She enjoyed working from home with the work/life balance it advocated and confirmed her work had not been negatively affected by working from home. She still worked from the office twice a month to keep in contact with colleagues and promote team bonding. Feedback received from managers had been positive.

The Chair thanked Sandeep, Rupert and Abena and made reference to the recurring prominent theme throughout SPA of continuous learning and improvement. Alexander Carpenter, NED and Trust Health and Wellbeing Guardian, was pleased to hear how health and wellbeing was also very prominent and how the SPA team was creating a collaborative culture/team environment.

Sarah Willis commented on the wonderful staff stories and initiatives which promoted health and wellbeing and felt there would be benefit in sharing their stories in other forums such as the Senior Leadership Team and Our Future Our Way.

The Chair once again thanked all the team for such a fantastic presentation.

TB/24/065

Questions from the Public

Three questions had been submitted to the Board and responses were given as follows:-

Question 1: from a family member of a service user in relation to our Hawthorne Centre in Coalville which falls under the remit of our Directorate of Mental Health and where they were not as satisfied as they could be with the service received.

Tanya Hibbert, Director for Mental Health Services responded: the complainant was contacted the day after they submitted their question and at this point they requested their complaint be managed formally under the LPT complaints process. Apologies were offered that the complainant felt they had to raise these concerns and also for the experience of their son and would seek to make things right and restore the therapeutic relationship and trust with this particular service user and their family.

Question 2: related to vaccinations and asking for latest figures on the MMR vaccination uptake rates in the City of Leicester, the latest Covid booster uptake and any success stories for sharing.

Anne Scott, Director of Nursing, Allied Health Professionals and Quality responded: the update on the latest MMR vaccination rates in the City of Leicester is that the school aged immunisation service is offering the MMR vaccine to all eligible school aged young people from the age of 7-11 and in our Special Educational Needs and Disabilities (SEND) settings. This is part of an ongoing vaccination programme and at the moment uptake is low, currently approximately 15 to 30 vaccines per week across Leicester, Leicestershire and Rutland (LLR).

	<p>Latest Covid-19 booster update rates - we can only comment on our inpatient uptake and our vaccination team have been working across our inpatient areas to offer the Covid vaccination to any eligible patients since 1 May 2024. To date 53 vaccinations have been given on 11 wards. There is a planned programme approach to offer this to all our inpatient wards in rotation. We are also able to offer a bespoke service for any patients who are due to be discharged before the planned clinic date.</p> <p>Sharing of success stories – this would be the ability to offer a flexible, bespoke service for the Covid vaccination alongside planned clinics for each inpatient site across the trust over the next few months to all eligible patients before they are discharged.</p> <p>Question 3: related to a service user under the care of our Directorate of Mental Health using some of our therapy services and engaging more with the individual using those services and whether we are listening to our service users' and taking on board their particular needs. Tanya Hibbert, Director for Mental Health Services responded: I am very sorry to hear about this service users experience of mental health services. Whilst I cannot provide a specific response in relation to their individual experiences and circumstances, I can share that there is a lot of work underway to ensure there are more trauma informed ways of working and to change the way we ask patients to share with us what difficulties they are experiencing so that we can work in more collaborative ways in developing co-produced care plans.</p>
TB/24/066	<p>Declarations of Interest Report (Paper A) No further declarations of interest were received in respect of items on the agenda.</p> <p>Resolved: The Board received this report and noted the declarations of interest contained within.</p>
TB/24/067	<p>Minutes of Previous Public Meeting held 26 March 2024 (Paper B) Faisal Hussain to be added to the list of attendees as he was present at the meeting.</p> <p>Resolved: Subject to the above amendment, the minutes were approved by the Board.</p>
TB/24/068	<p>Matters Arising (Paper C) There were no outstanding matters arising.</p>
TB/24/069	<p>Chair's Report (Paper D) The Chair presented this report which summarised Chair and Non-Executive Director activities and key events relating to the well-led framework since the last Board meeting. Attention was brought to the proposed changes to NED roles and responsibilities to take account of the new incoming NED and the departure of Ruth Marchington. Crishni Waring took this opportunity to thank Ruth Marchington both personally and on behalf of Board for her contribution over the years in supporting the Board journey.</p> <p>Resolved: The Board received this report and supported the changes</p>

	contained within.
TB/24/070	<p>Chief Executive’s Report (Paper E) Angela Hillery introduced this report which provided an update on current local issues and national policy developments since the last meeting. Firstly, Angela Hillery offered her thanks to Ruth Marchington for the support given on her appointment as Chief Executive. Secondly, thanks were offered to the SPA staff for their presentation which showed innovating ways of working and going above and beyond and lastly, highlighted the following key points from the report:-</p> <ul style="list-style-type: none"> • Celebrating Excellence Awards – a record 266 nominations had been received. A process of shortlisting and judging would now take place and a sponsored event will take place on the evening of 11 October 2024 to celebrate all finalists. • Leicester City Football Club – thanks were offered for their work with LPT. This was a great example of supporting physical and mental health and was very well received in the Bradgate Unit. • The new Joy social prescribing website had been launched - it offered a diverse range of categories tailored to meet individuals’ needs from fitness and art classes, to carer support, diabetes self-help groups, food banks, counselling and Age UK services. • The College of Clinical Leadership for LLR is a great opportunity and offered LLR the opportunity to be a vanguard site. • Two members of the executive team, Anne Scott and Helen Thompson, will be retiring and Angela Hillery took the opportunity of thanking them both for their contributions in striving to drive improvements and take LPT forward. The Chair echoed these thanks. <p>Crishni Waring referred to the Joy website and felt this was a fantastic opportunity in LLR because it was encouraging people to be proactive. In addition, in terms of engagement with lived experience partners, the role of the People’s Council was so important and confirmed this would be included in the Board development programme. Alexander Carpenter reflected on this morning’s presentation and suggested SPA could be linked and promoted through the Joy website.</p> <p>Resolved: The Board received this report for information.</p>
TB/24/071	<p>Environmental Analysis (verbal) Angela Hillery attended a NHS Provider quality improvement event recently – this was a good, positive event. Josie Spencer informed colleagues that conversations were ongoing around quality improvement at the Quality and Safety Committee. Kate Dyer advised that how quality improvement and clinical audit is tracked through level 1 committees is currently being considered and more broadly how Trust Board is sighted and how it is captured as part of the well led framework.</p>
TB/24/072	<p>Board Assurance Framework (Paper F) Kate Dyer presented this report as part of a continuing risk review process. It is the first time that Board have seen the new revised format which went live 1 April 2024. The controls and assurance had now been aligned and was</p>

	<p>designed around the cause, risk and effect terminology. The BAF would continue to evolve and be fully populated over time.</p> <p>There are nine strategic risks on the Board Assurance Framework (BAF), of which three are high risk (access, estates, workforce) as detailed in the report and appended slide pack.</p> <p>Hetal Parmar welcomed the new format and asked if the monitoring of success and what success looked like could be made clearer. In response, Kate Dyer explained that the measures are linked to strategic ambitions and would therefore change and shape over time and this could be linked more in the covering report.</p> <p>Crishni Waring referred to BAF01 and the responsibility of the Board going beyond clinical outcome to broader population health outcomes and queried whether the word 'clinical' was correct in the new context. Kate Dyer confirmed that the impact on wider social determinants would be considered moving forward.</p> <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/073	<p>Audit and Risk Committee Highlight Report: 19 April 2024 (Paper G)</p> <p>Hetal Parmar introduced this report and drew attention to the following:-</p> <ul style="list-style-type: none"> • No alert or advise items to highlight. • Assure items included the excellent follow-up implementation rate of audit actions, the positive discussion around the annual accounts with the committee being assured overall of the in-depth review being presented and similarly on the draft annual quality accounts. <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/074	<p>Documents Signed Under Seal Quarter 4 Report (Paper H)</p> <p>Kate Dyer introduced this report which provided the detail on documents signed under seal during Quarter 4 of 2023/24.</p> <p>Resolved: The Board received this report for information.</p>
TB/24/075	<p>Provider Licence Compliance (Paper I)</p> <p>Kate Dyer introduced this report which provided assurance to the Board that the Trust is compliant with the conditions of its NHS provider licence. Whilst the Trust is not required to submit self-certifications to NHS England (NHSE), it may be required to provide evidence of its compliance with licence conditions, specifically that the Trust has:</p> <ul style="list-style-type: none"> • effective systems in place to ensure compliance with the conditions of the NHS provider licence, NHS legislation and the duty to have regard to the NHS Constitution (condition G5 formerly G6); • complied with governance arrangements (condition NHS2, formerly FT4) <p>Resolved: The Board received this report and confirmed the Trust's compliance with Condition G5 for 2023/24 and declared compliance with self-certifications in respect of Condition NHS2 for 2023/24.</p>
TB/24/076	<p>Trust Board Annual Effectiveness Review (verbal)</p>

	<p>Kate Dyer reported that the new round of Annual Effectiveness Reviews would commence with the Level 1 committee reviews during June. These would then be received as a summary to the Audit and Risk Committee with the Board receiving confirmation via the AAA Highlight Report from the Audit and Risk Committee at its September meeting alongside the full review for Trust Board.</p>
<p>TB/24/077</p>	<p>Committees in Common Joint Working Group Highlight Report: 29 April 2024 (Paper J)</p> <p>Faisal Hussain introduced this report and drew attention to the following:-</p> <ul style="list-style-type: none"> • No alert or advise items to highlight. • Assure items included reviewing the key strategic priorities of the group work for 2023/24 with the exception of research and innovation which would be reviewed at the next meeting. <p>Crishni Waring advised members that to strengthen NED representation, an additional NED for each organisation would be joining the Joint Working Group, with Hetal Parmar being the LPT representative.</p> <p>Resolved: The Board received this report for information and assurance.</p>
<p>TB/24/078</p>	<p>East Midlands Alliance Common Board Paper (Paper K)</p> <p>Alison Gilmour introduced this report which provided a summary of the work and plans of the East Midlands Alliance. The East Midlands Alliance is made up of six of the largest providers of mental health services in the East Midlands region (Derbyshire Healthcare, Leicestershire Partnership, Lincolnshire Partnership, Northamptonshire Healthcare, Nottinghamshire Healthcare and St Andrew’s Healthcare) to work together in partnership to enable the best mental health, learning disability and autism care and support for the people of the East Midlands. It was reported that:-</p> <ul style="list-style-type: none"> • Permission had been granted to backfill the Mental Health Innovation Lead role. • The Alliance have agreed to extend the mental health patient safety programme by 2 years. • NHFT will be taking forward the procurement to provide some best practice workshops to help with the implementation and application of the Mental Health Act across the region • Medical Directors continued to work on the clinical escalation and principles to resolve some of the complicated care issues which exist between providers. • In September, the Alliance is going to convene a learning and networking event for Boards and Lead Governors. <p>Josie Spencer noticed within the report that that LPT was not picking up the physician associates initiative. Bhanu Chadalavada clarified there was an internal task and finish group to look at the physician associates so although not part of the initial funding stream, was very much part of the project.</p> <p>Alexander Carpenter asked how the good practice, where LPT is not leading the way, was being brought back to be formulated into plans for learning. Sarah Willis confirmed there was a Human Resource Director (HRD) Alliance Network that meets, discusses and reviews all programmes of work and was</p>

	<p>the route used to understand, learn and feed back into LPT.</p> <p>Crishni Waring suggested that as LPT did not have Governors perhaps it might want to include the People's Council.</p> <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/079	<p>Step Up to Great 2023/24 Q3/4 Final Report (Paper L)</p> <p>Alison Gilmour presented this report which provided a summary of key achievements for 2023/24. Positive progress across all the domains had been made but it was recognised there was more to do. Actions would be carried forward from 2023/24 report to 2024/25 in what will be the final delivery year for Step Up to Great (SUTG).</p> <p>It was noted that some elements of the report were not up to date and this would be rectified for the next report.</p> <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/080	<p>Quality and Safety Committee Highlight Report: 30 April 2024 (Paper M)</p> <p>Josie Spencer introduced this report and drew attention to the following:-</p> <ul style="list-style-type: none"> • No alert items to highlight • Assure items included the discussion around the BAF01, the neurodevelopmental business case and Learning from Deaths : <p>Resolved: The Board received the report for information and assurance.</p>
TB/24/081	<p>Safer Staffing Monthly Report (Paper N)</p> <p>Anne Scott introduced this report which provided a full overview of nursing safe staffing during the month of March 2024, including a summary and update of new staffing areas to note, potential risks and actions to mitigate the risks to ensure safety and care quality are maintained. This report triangulated workforce metrics; fill rates, Care Hours Per Patient Day (CHPPD), quality and outcomes linked to Nurse Sensitive Indicators (NSIs) and patient experience feedback. Key points were highlighted as:-</p> <ul style="list-style-type: none"> • Temporary worker and agency usage continued to decrease across inpatient areas. • Continued to ensure where there is increased acuity and demand that safe and effective care is balanced with staffing requirements • Bank staff compliance with training is improving. • A deep dive review into falls incidents was being scoped to review accurate data and comparison information and will be reported on in due course. • Further to previous queries around the Care Hours Per Patient Day (CHPPD) and Nurse Staffing Fill Rate variation, further narrative was provided in the report which detailed the clinical reasoning for the variation, however, to understand the variation further, a deep dive will be undertaken to review the exceptions/variation to be presented in future reporting. • The Registered Nurse vacancy rate is slightly decreased. • The Healthcare Support Worker vacancy rate is also slightly decreased

	<ul style="list-style-type: none"> • In response to a national NHSE directive for all NHS providers to cease all 'off framework' agency usage spending by July 2024, a vacancy and agency reduction plan is progressing with high level priority actions noted in the report. • A sustainable programme of work was now in progress for annual establishment reviews for inpatient areas. <p>In response to a question from Liz Anderson, Sarah Willis clarified that this Safe Staffing Report linked closely with other work in relation to recruitment of workforce, agency and bank staff usage, staff compliance around training, plans to reduce agency, growing workforce and working towards reducing agency use. This work, and the assurance, rests with the People and Culture Committee and would come through the AAA Highlight Report. LPT was currently a user of off framework agency and nationally there has been a mandate that no NHS organisation should be using off framework by July 2024. Sarah Willis further offered assurance that there is a very closely monitored plan to change our workforce with a view to stopping off framework use by the end of June and the trust was currently on target to achieve that.</p> <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/082	<p>Patient Safety and Serious incident Learning Assurance Report (Paper O)</p> <p>Anne Scott introduced this report which provided assurance on LPTs incident management and Duty of Candour compliance processes for the months of March and April 2024. The process reviews systems of control which continue to be robust, effective and reliable, underlining the commitment to continuous improvement of keeping patients and staff safe by incident and harm reduction. This report also provided assurance on 'being open', numbers of incident investigations, themes emerging from recently completed investigation action plans, a review of recent Ulysses incidents and associated lessons learned. It was reported that:-</p> <ul style="list-style-type: none"> • all teams were working collaboratively to continuously improve the ability to review and triangulate incidents and improve data and intelligence • work continued with Change Leaders to progress psychological safety for staff as part of the implementation of the Patient Safety Incident Response Framework (PSIRF) • investigation compliance was improving • continue to see normal variation in the number of Category 2 and Category 3 pressure ulcers • the special cause concern previously reported has now significantly improved and in particular the CHS Directorate. • total number of falls incidents was reducing • work has progressed on clinical handover guidance • good work continues on the medicines safety project <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/083	<p>CQC Inspection Update (Paper P)</p> <p>Anne Scott introduced this report which provided assurance on the Trust's</p>

	<p>compliance with the Care Quality Commission (CQC) fundamental standards and an overview of current inspection activities. It was reported that the CQC continues to prioritise inspections based on services where there is evidence of risk or harm to patients and smaller targeted services. Alongside the inspections carried out on risk-based activity, they will also undertake ongoing monitoring of services offering support to providers to ensure that patients receive safe care. Any future inspections will be carried out under the new single assessment framework. The one ongoing action from the 2021 inspection is noted within the report and relates to estates and facilities dormitory work and this continues to progress and be on track. Following initial feedback from the January 2024 unannounced inspection directorates have developed an action plan to initiate progress against this feedback. The final report is due to be published on 30 May 2024.</p> <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/084	<p>Finance and Performance Committee Highlight Report: 30 April 2024 (Paper Q)</p> <p>Alexander Carpenter introduced this report and advised:-</p> <ul style="list-style-type: none"> • there was an acknowledgement of the pressures in the Directorate of Mental Health throughout February and March operating at an escalation level OPEL 4. • there had been no decision around funding for the business case for neuro-developmental services and therefore this was putting increased pressure on continued waiting lists and the impact on staff health and wellbeing was acknowledged. • due to significant staff shortages in the Subject Access Requests (SAR) Team, the average response rate over the year for SARs being completed within 30 days was 73% which was significantly below the expectation of the Information Commissioner’s Office. Everything possible was being done by the Data Privacy Team, revised processes had been implemented and some improvement was now being seen. • good levels of assurance in 360 Assurance update. • celebrating outstanding performance in the phlebotomy services for young people agenda 12 and above. <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/085	<p>Finance Monthly Report – Month 1 (Paper R)</p> <p>Sharon Murphy introduced this report which provided an update on the Trust financial position. It was noted that a refreshed Finance Report for 2024/25, using Statistical Process Charts (SPC) charts where appropriate, would be submitted in the coming months. Month 1 reported a deficit of £470k at the end of April which is in line with plan. There was some overspend in some services but this was mostly due to budget phasing – the confirmed position would be reported in Month 2. Agency spend is decreasing which was positive.</p> <p>As a system, NHS England (NHSE) confirmed the draft plan submitted was not acceptable to them and so work was ongoing to reduce the deficit across system partners. At this stage, LPT was not expected to go any further than the breakeven plan. NHSE issued some new business rules guidance which looks like it may have implications for systems that cannot deliver an</p>

	<p>acceptable plan and which could have an impact in terms of capital and revenue allocations across the systems. The revised guidance was currently being reviewed to ascertain any implications for LPT.</p> <p>Angela Hillery stressed the importance of monitoring this closely for both LPT and LLR as a system.</p> <p>Resolved: The Board received this report and accepted the reported year to date financial performance.</p>
TB/24/086	<p>Performance Report – Month 1 (Paper S)</p> <p>This report, presented by Sharon Murphy, provided the Trust's performance against Key Performance Indicators (KPIs) for April 2024. The contents of the report were summarised and of particular note was the positive performance around vacancy rates and sickness absence numbers. There was nothing to escalate to Board.</p> <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/087	<p>Charitable Funds Committee: 19 March 2024 (Paper T)</p> <p>Faisal Hussain introduced this report and drew attention to the following:-</p> <ul style="list-style-type: none"> • No alert or advise items to highlight • Assure items included the review of the 2023/24 priorities for the committee and in preparation for the 2024/25 priorities. Discussion took place around increasing the visibility of the work of the Raising Health Charity and there was a clear understanding that with fewer flagship appeals there is greater momentum. • The financial position was strong with an overall balance closing at £2.6m. • The Celebrating Excellence Awards was again being fully funded by sponsors so no money was being utilised from NHS core funds. <p>Crishni Waring thanked Faisal Hussain for both the update and taking over the chairing of the Charitable Funds Committee and reflected on how the Charity could perhaps support some of the strategic priorities at a future Board development session.</p> <p>Resolved: The Board received this report for information and assurance.</p>
TB/24/088	<p>People and Culture Highlight Report: 30 April 2024 (Paper U)</p> <p>Ruth Marchington introduced this report and advised there were no alert items, and although targets had not been achieved in all areas the committee recognised significant achievements had been made and also that actions were having an impact on agency spend, recruitment and retention. Interestingly, assurance triangulated with the NHSE decision to reduce monitoring meetings. Ruth Marchington took the opportunity to thank the HR leadership team for excellent assurance reports as well as the Strategic Workforce Group (SWG) for their responsiveness to requests and finally thanks were offered to Sarah Willis for supporting the first year of the People and Culture Committee .</p> <p>Resolved: The Board received this report for information and assurance.</p>

TB/24/089	<p>Review of risk – any further risks as a result of board discussion? No further risks were identified as a result of the discussions in today’s meeting.</p>
TB/24/090	<p>Any Other Urgent Business The Annual General Meeting would take place as a virtual meeting on 12 September 2024 between 3.30pm-5.30pm.</p> <p>The Chair concluded the meeting by thanking Ruth Marchington, Anne Scott and Helen Thompson on behalf of the Board for their passion to improve the health outcomes for the LPT community and wished them all the best for the future.</p>
TB/24/091	<p>Papers/updates not received in line with the work plan: n/a</p>
<p>Close – date of next public meeting: 30 July 2024</p>	