

**LEEDS COMMUNITY HEALTHCARE ANNUAL GENERAL MEETING  
19 SEPTEMBER 2023**

**Attendance**

<b>Present:</b>	Brodie Clark CBE Sam Prince Helen Thomson DL Khalil Rehman Dr Ruth Burnett Yasmin Ahmed Laura Smith	Trust Chair Interim Chief Executive Non-Executive Director Non-Executive Director Executive Medical Director Interim Executive Director of Finance and Resources Director of Workforce, Organisational Development (OD) and System Development (LS)
<b>In Attendance</b>	Helen Robinson	Company Secretary

<b>Apologies:</b>	Ian Lewis Richard Gladman Alison Lowe OBE Rachel Booth Steph Lawrence MBE  Jenny Allen	Non-Executive Director Non-Executive Director Non-Executive Director Associate Non-Executive Director Executive Director of Nursing and Allied Health Professionals Director of Workforce, Organisational Development (OD) and System Development (JA)
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<b>Minutes:</b>	Liz Thornton	Board Administrator
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**Observers:**

<b>Members of the Staff and public:</b>	53 members of staff and members of public attended the meeting
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## Item 2023-24 (1)

### Discussion points:

#### Welcome and introduction

The Trust Chair welcomed everyone and opened the meeting by reflecting on the Trust and its journey over 2022/23. He said that the Trust was one of only a relatively small number of dedicated Community Trusts across the country. Its work was totally focussed on the community and it progressed that with a commitment and a core belief that health care should start and finish at home. The Trust was increasingly becoming an integral part of those communities, forging stronger links with other organisations which supported people at and in their homes, working closely with general practices, and maintaining a relevant and essential partnership with hospitals with a shared mantra of *community first*.

That focus and commitment had been strengthened over the past year albeit in a context of Covid-19 and waiting lists; with an often-overwhelming set of demands on a depleted but highly committed workforce, within a significant redesign and reordering of the broader NHS. He said that despite this the Trust had progressed a culture of innovation and working in agile ways to improve the services it offered:

- The Trust had led the development work across West Yorkshire in shaping and defining 'the best of community delivery'. It had developed and led the Collaborative of community providers - in respect of *identifying and driving Best Practice*, in respect of *learning from each other* and in respect of *new ways of delivering this close to home agenda*. That community collaborative group had now found its feet and was on a journey of improvement and mutual support – for the absolute benefit of all five key Places across West Yorkshire.
- The Trust had shown for Leeds - innovation and ingenuity – in terms of new ways of working and new and important partner relationships.
- It had triggered a 'self-management' programme – where patient groups with the ability and wish, could take on the responsibility for administering their medication – a sense of empowerment that was welcomed by most.
- In response to staffing shortfalls, the Trust had introduced a hyper-local recruitment offer, with outstanding results in attracting those with skills and abilities to join under flexible working arrangements. Added to that, the Trust had recruited qualified staff from overseas who were proud to serve this community.
- The Trust had refurbished and reopened a completely refreshed Seacroft Clinic and successfully completed the highly complex move of the Headquarters from Stockdale House to The White Rose complex on the outskirts of the city. Having now seen the new arrangements – it had been worth it – providing accommodation fit for this 'time' and to a standard that our excellent staff deserved.

The Trust Chair said that staff had been outstanding over the last 12 months. He visited services on a regular basis and could personally evidence the commitment, care, the 'extra mile' attitude and the ability he had observed. They had worked through these complex times and he was proud of the contribution that they continued to make to the city. The Trust was well led by a top team of executives and senior managers who knew and understood the problems and worked in partnership with staff to achieve solutions.

He referred to the recent departure of the Chief Executive, Thea Stein. He said that she had meant much to the Trust and to the city, but there would always be new people in developing roles and that must be part of the lifeblood of any organisation as time moved on. He placed on record enormous thanks to Thea for the extent of her time, commitment, and passion for the Trust. Its unique cultural identity owed much to her. He also thanked non-executives for their focus and work towards the success of this organisation over the last year. He said that their knowledge, experience, scrutiny, and commitment remained an important feature of the progress that this organisation had made.

In conclusion he said that over the next year the challenges would remain. The partnership journey would grow and develop. The Trust needed to champion the value and benefits of community healthcare and help others to understand what this looked like.

**Item: 2023-24 (2)****Discussion points****Interim Chief Executive's presentation: reviewing 2022/23**

The Interim Chief Executive said that this was her first opportunity to talk about Leeds Community Healthcare at an Annual General Meeting and she felt very privileged to be able to do so. She acknowledged the roles that Thea Stein, former Chief Executive and Bryan Machin, former Executive Director of Finance and Resources had played during 2022/23 and took the opportunity to publicly thank them both for their leadership and commitment to the organisation.

Her presentation covered 2022/23 at 'a glance' and clearly illustrated how the Trust was working with partners, patients, and the public to seize the opportunities that the current environment brought to provide the very best services in every community it served. There had never been a time when the focus had been so much on providing services to people in their homes, or as close to their homes as possible or such a focus on the role of community services written into policy and national measures.

She highlighted:

- New investment in several key services including the Home Ward which last year prevented over 1400 admissions into hospital; the Neighbourhood night service – a very special and valuable service that enabled people to stay at home whilst being looked after by the Home Ward, or at the end of their life, enabling them to die at home if that was their wish.
- In partnership with Leeds City Council and Leeds Teaching Hospitals Trust, the Trust had been awarded Unicef Baby Friendly Initiative Gold Status.
- The launch of integrated clinics with primary care to ensure people using the Trust's services had the best experience.
- Enhanced the ground-breaking initiative with the Third Sector.
- Welcomed the first cohort of internationally educated nurses to the Trust, bringing a wealth of experience and working in Neighbourhood Teams and Recovery Hubs.
- Success with the hyper-local recruitment, particularly in campaigns in the Otley area to recruit to the recovery hub at Wharfedale.
- The Transfer of Care hub at St James', was developing Active Recovery and exploring the potential for a Community Wellbeing Service which would integrate home care with NHS and social care services.
- Ensuring LCH was a great place to work:
  - including a No Bystanders Summit; its purpose to take action to reduce staff experiencing abuse, harassment, or discrimination in the course of their work.
- Prime Minister, Rishi Sunak and the Minister for Care, Helen Whately visited the Meanwood Neighbourhood Team and the Musculoskeletal Team. This provided an opportunity to showcase the amazing intermediate care work that goes on in community services every day, helping to keep people out of hospital and expediting early discharge.

In conclusion she said that 2023-24 held lots of opportunity for the Trust and it would continue to find ways of keeping people at home or in their own community, enabling young people to thrive and providing the very best possible care, to continue to work in partnership with colleagues across Leeds and the wider system; and make the Trust a great place to work.

**Item: 2023-24 (3)****Discussion points****Annual report and accounts 2022/23: explaining the finances**

The Interim Executive Director of Finance and Resources presented an overview of the Trust's accounts and financial performance for 2022/23.

The Trust had formulated its expenditure plans to maintain day-to-day services, to continue to address waiting list backlogs and to continue to innovate and improve.

The Trust was firmly embedded in system working. The Interim Executive Director of Finance and Resources explained the importance of this for the Trust's financial performance as it had a responsibility not only to manage its financial resources efficiently and effectively but also to play a part in helping the Leeds health and care system and the West Yorkshire Integrated Care System to manage within the resources allocated.

For the 12<sup>th</sup> consecutive year Leeds Community Healthcare had met its financial targets with an adjusted financial performance surplus of £1.0m. The Interim Director of Finance and Resources said that the challenge to achieve that did not get any easier and, whilst the expectation was that the Trust would meet its financial duties in 2023/24, the Board had approved a deliverable revenue and capital budget, it would be more difficult than in many of the 12 previous years.

The Trust had spent its full capital allocation for the year of £3,778,000. The significant expenditure during the year had been the comprehensive refurbishment of Seacroft Clinic. The balance of capital resource was spent on the continued reduction in backlog maintenance of buildings, ensuring that they were safe environments for staff and patients, and investment in new and replacement clinical equipment and information technology.

In summary, she said that she hoped that the presentation reflected the critical importance of all Trust staff and managers in working to deliver the best possible care each year whilst meeting financial targets and she thanked them for doing so.

In conclusion the Interim Executive Director of Finance and Resources said that the Trust was better placed than many to manage the current NHS financial challenges but must continually seek to improve efficiency levels whilst improving and developing services.

**Item: 2022-23 (3)**

**Discussion points**

**Question and answer session**

The Trust Chair opened this section of the meeting by inviting questions and comments. No questions had been submitted prior to the meeting.

John Beal, Chair of Leeds Healthwatch commended the Trust's role in the Home First Programme which aimed to achieve more independent and safe outcomes and help more people to stay at home and improve the experience for people, carers, with rehabilitation, reablement, and recovery in their home. He asked what steps the Trust could take to access increased funding to achieve this more effectively and how it could better support unpaid carers who played such a vital role in enabling people to stay at home.

The Interim Chief Executive said that there were ongoing conversations with partners across the city to ensure that the vision to achieve a sustainable, person-centred, home-first model of intermediate care across Leeds that was joined up and promoted independence, was achieved successfully with resources allocated appropriately.

In terms of supporting unpaid carers the Trust was working proactively with Leeds City Council and 3<sup>rd</sup> Sector partners to ensure that a more 'joined up' approach was implemented but this was a 'work in progress'. She provided assurance that the Trust always worked with families to ensure that they were fully involved in care plans

A representative from Forum Central thanked Board Members for their presentations. She said that she welcomed and celebrated the strong sense of partnership working across the City which was benefitting patients and communities and putting health equity at the forefront of the agenda. She asked what steps the Trust was taking to continue to improve the health of the broader community.

The Interim Chief Executive said that the Trust was wholly committed to working with 3<sup>rd</sup> Sector organisations across the city to work in a better way to provide the best health care possible for all the citizens of Leeds. She said that the Trust took every opportunity to learn from other organisations.

**Item:2022-23 (4)**

**Close of the 2022/24 Annual General Meeting**

The Trust Chair thanked everyone for joining and closed the formal part of the meeting.

He asked the invited attendees to remain and listen to presentations on:  
The Enhance Programme – partnership working with the 3<sup>rd</sup> sector, enhancing NHS capacity and people's lives.

**Date, time, and venue of the Leeds Community Healthcare NHS Trust  
2023/24 Annual General Meeting:  
To be confirmed**