



Trust Board Meeting held in Public

Venue: Mercure Hull Grange Park Hotel, Grange Park Lane, Willerby, Jull, HU10 6EA

Date: Tuesday 26 July 2016

Time: 1030 hours

Chairman: Kathryn Lavery

Present:

Board Members:

Kathryn Lavery (KL) Chairman
Patricia Drake (PD) Deputy Chairman and Non-Executive Director
Rod Barnes (RB) Chief Executive
Roberta Barker (RBa) Director of Workforce and Organisational Development (Interim)
Dr Dave Macklin (DM) Executive Director of Operations
Erfana Mahmood (EM) Non-Executive Director
Dr Julian Mark (JM) Executive Medical Director
John Nutton (JN) Non-Executive Director
Steve Page (SP) Executive Director of Quality, Governance and Performance Assurance
Barrie Senior (BS) Non-Executive Director
Robert Toole (RDT) Executive Director of Finance (Interim)
Mary Wareing (MW) Non-Executive Director

Apologies:

John Nutton (JN) Non-Executive Director

In Attendance:

Dr Phillip Foster (PF) Director of Planned and Urgent Care
Anne Allen (AA) Trust Secretary
Ronnie Coutts (RC) Non-Executive Director (Designate)
David Bolam (DB) Public Member (North)
Jock Crawford (JC) Clinical Supervisor and YAS' Freedom to Speak Up Guardian
Owen Southgate (OS) NHS Improvement

Minutes produced by: (JL) Joanne Lancaster, Committee Services Manager

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The meeting commenced at 1045 hours.	

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1	<p>Apologies / Declaration of Interests Apologies were noted as above and declarations of interest would be considered during the course of the meeting.</p>	
2	<p>Minutes of the Meeting held on 24 May 2016 including Matters Arising (not on the agenda) and Action Log The Minutes of the Trust Board Meeting in Public held on 24 May 2016 were approved as a true and fair representation of the meeting subject to the following amendment.</p> <p>Page 11, paragraph 6 ‘He advised that the Trust was facilitating a workshop with relevant parties.....’ Amended to ‘He advised that the Trust was liaising with NHS Improvement (NHSI) on a workshop with relevant parties....’</p> <p>Matters Arising SP referred to the item on page 15, YAS Charity Strategy 2016/19 and to the Wellbeing Fund. He would discuss this outside of the meeting with EM.</p> <p>Action Log: RB guided the Board through the Action Log.</p> <p>Action PB-433 – ‘Restart a Heart Day’ coincided with a Trust Board meeting –TEG would discuss outside the meeting to resolve. Action remains open.</p>	
3	<p>Chairman’s Report The Chairman informed the Board that on 1 July, her first day with the Trust, she had attended the staff ‘We Care Awards’ and, on 19 July the YAS Forum in Ripon. Both events had provided a positive introduction to YAS and an excellent means of meeting with YAS’ staff and Members.</p> <p>She had now met a number of staff and welcomed the open and honest discussions which had taken place. She stated that she was looking forward to working with YAS and everyone in the organisation.</p>	
4	<p>QUALITY, SAFETY AND PATIENT EXPERIENCE</p>	
4.1	<p>Patient Story A patient story was provided at every Board meeting held in Public to highlight the work of the Trust and to learn about steps being taken to improve its services and the knowledge of its staff.</p> <p>Due to a technical issue the patient story video could not be played. It was agreed to circulate a transcript of the story to Board Members following the meeting.</p> <p>The Board listened to a verbal update of a patient with complex health needs who was an oxygen user and used a walking aid. On a temporary basis the patient had been using the Patient Transport Service (PTS) for hospital appointments.</p> <p>Due to the operational practices in place at the time, the patient was</p>	

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<p>prevented from taking her own oxygen or walking aid on the PTS vehicle. A new policy had now been implemented enabling patients to take their own equipment when this was requested by the clinician at the time of booking the journey.</p> <p>Action: To circulate a transcript of the patient story to Board Members.</p>	AA
<p>4.2 For Assurance: Chief Executive’s Report and Integrated Performance Report (IPR)</p> <p>The report provided assurance on the activity of the Trust Executive Group (TEG) from 17 May 2016 to 18 July 2016 and the key variances/movements contained within the June Integrated Performance Report (IPR).</p> <p>The Chairman invited DB, a member of the public from North Yorkshire, to ask his question in regard to the Chief Executive’s Report and the IPR.</p> <p>DB referred to the extension of hours for the Air Ambulance into night time flying and asked whether the Acute Trusts were able to facilitate night landing? The Board heard that the majority of Acute Trusts could either facilitate night time landing or were in the process of establishing facilities to enable it.</p> <p>DB referred to page 3 of the IPR, specifically A&E performance against the eight minute standard being below the 75% target, and the statement that this was partly due to a reduction in resources in line with budget requirements. He asked for an explanation in this regard.</p> <p>The Board heard that profiling matched resource to demand which may indicate that less resource was required at certain periods. It was noted that there had been unexpected increase in demand for the relevant period and this had been a national issue across the ambulance sector.</p> <p>The Chairman thanked DB for his questions.</p> <p>The Chairman requested, in future, that members of the public contact her direct, either in person at a meeting held in public or through YAS’ office, in order she could understand their issues or concerns and provide a personal response. The Chairman’s contact details were shared and it noted these are available on YAS’ website.</p> <p>The Board expressed its congratulations to a member of YAS’ staff, Alan Baranowski, who had been recognised with a Queen’s Ambulance Medal in the Queen’s Birthday Honours List, for his outstanding contribution to the ambulance service.</p> <p>The Board noted the challenging control total of £5.12m set by NHS Improvement (NHSI). The Trust was in a relatively strong financial position and the Executive was working to finalise plans to deliver the control total.</p> <p>The Board noted increased demand within A&E operations and a</p>	

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<p>subsequent reduction in performance in response times. The Board received assurance that mitigation plans were being developed. It was noted ambulance services nationally were experiencing increased demand and that many of the contributing factors to declining A&E performance were outside YAS' control.</p> <p>The Board also noted challenges for the Patient Transport Service's (PTS) performance in May and June due to changes to journey planning and the introduction of auto-scheduling which has impacted particularly on renal patients. The Board was assured the Executive had developed mitigation plans to address the drop in performance and quality.</p> <p>The Board heard that the Stroke 60 Ambulance Clinical Quality Indicator (ACQI) target in the context of Acute Stroke Centres was being rationalised across the region. This was an increasing challenge for the Trust. It was noted that this had been raised on a national basis with NHS England.</p> <p>The Board noted that an issue for PTS renal patients and the ACQI Stroke 60 performance would be monitored through the Quality Committee and the Board kept updated. The Finance and Investment Committee would continue to monitor the PTS Transformation Programme closely in order to gain an appropriate level of assurance in this regard.</p> <p>The Board discussed the acute service reconfigurations across the region and the potential this had to further compound hospital turnaround times with their consequential effects on YAS' performance. It was noted that Mid Yorkshire Hospitals Trust had assured YAS their proposed changes to services at Dewsbury Hospital would improve services and that capacity and ambulance turnaround would not be adversely affected. It was noted that a proposed reconfiguration within Calderdale was also taking place at the same time as Mid Yorkshire and, collectively risked increasing the pressure on YAS' resources.</p> <p>The issue of the appropriate use of interfacility transfers was discussed and it was noted that YAS was undertaking a review in this regard.</p> <p>The Board expressed concerns around increasing A&E demand within the context of achieving the Trust's financial control total.</p> <p>The Board agreed YAS would always place patient care and safety above the financial agenda and that the Trust had invested in resource to meet the increase in demand. The challenge the Trust was facing with increased demand had been raised with the Lead Commissioner. The Board acknowledged that Quarter 1 activity was not necessarily an indicator of the rest of the financial year. The Trust would continue to monitor performance and demand closely.</p> <p>The Board noted the Resourcing Escalatory Action Plan (REAP) level system within A&E Operations and that appropriate escalation processes would be implemented as required.</p>	

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<p><u>Operations Directorate</u> The Board noted the progress reported within the A&E Transformation Programme.</p> <p>Discussion took place around hospital turnaround times in the context of ambulance equipment and patient safety. A letter had been sent to Acute Trusts but, to date YAS had not received any feedback. YAS' concerns in this regard had been provided to NHS Improvement (NHSI). The Board noted NHSI had facilitated a series of stakeholder workshops on the issue of hospital turnaround over the summer months.</p> <p><u>Clinical Directorate</u> The Board noted two positive issues within the Clinical Directorate:</p> <ul style="list-style-type: none"> • A reduction of 50% in medicine errors with none having been reported in May; • Mark Millins, Associate Director for Paramedic Practice had represented YAS at the first pre-hospital care conference in China. This was a significant reputational achievement for Mark and for YAS. <p><u>Quality, Governance and Performance Assurance</u> The Board was assured that compliance with safeguarding training had increased overall, with Level 1 child and adult training and Level 2 child safeguarding training above the 85% target level.</p> <p><u>Workforce and Organisational Development</u> The Board was assured that recruitment to all areas of the Trust continued at pace using the recruitment Tracker system, the functionality of which would shortly be expanded. Work was being undertaken to increase the visibility of employee well-being within the organisation. Local partnership working with the trade unions was increasing and more issues were being resolved nationally. The Board noted a cost pressure within the Education and Training budget and that work was being undertaken with Finance to address this.</p> <p>In respect of workforce issues, the Board heard that the Trust's Vision and Values were being refreshed, alongside the expected behaviours and competencies, Personal Development Plans (PDRs) and the leadership development programme. It was agreed that an update would be provided at the next Board meeting in September.</p> <p>Action: To provide an update to Board on the Vision and Values refresh, behaviours and competencies, Personal Development Plans (PDRs) and leadership programme</p> <p><u>Finance Directorate</u> The Board was assured of improvement against Key Performance Indicators (KPIs) for medical devices. The Board acknowledged the excellent performance of the Ancillary Service which had achieved 99.99% compliance on vehicle deep cleans for the month of June.</p>	<p style="text-align: right;">RBa</p>

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<p><u>Planned & Urgent Care Directorate</u> The Board heard that the Planned and Urgent Care function had organised an away day with business partners to look at future models of delivery. The development of a Clinical Advisory Service continued. YAS was providing a response to Commissioners in regard to their Joint Strategy for NHS111 and 999 services.</p> <p>It was agreed that a report be provided at the next Trust Board in Private on the use of financial reserves.</p> <p>Action: To provide a report at the Trust Board in Private on 27 September on the use of financial reserves.</p> <p>It was agreed that a report would be provided to the September Quality Committee on violence and aggression towards staff.</p> <p>Action: To provide a report to the September Quality Committee on violence and aggression towards staff.</p> <p>The Chairman thanked the Trust Executive Group for their update.</p> <p>Approval: The Trust Board noted and discussed the variances contained within the June 2016 IPR report, highlighted in the Executive Directors' reports and agreed that it had sufficient assurance on the activities of the Executive Team and Trust Executive Group during the reporting period.</p>	<p></p> <p>RDT</p> <p>RBa</p>
<p>4.3 For Assurance: Bi-Annual Report: Significant Incidents/Lessons Learned</p> <p>The report provided assurance to the Board on significant events highlighted through the Trust's reporting systems and by external regulatory bodies during Q3 and Q4, 2015-16. The report detailed actions taken and lessons learned.</p> <p>The slight increase in Serious Incidents was noted although this was not significant and was likely to be as a result of the Human Factors work being undertaken in the Emergency Operations Centre (EOC).</p> <p>The Trust was strengthening the support it provided to staff who had suffered violence and abuse from patients.</p> <p>Both the Quality Committee and the Finance and Investment Committee had discussed 'Claims' and had received the appropriate assurances that these were being managed effectively.</p> <p>The Trust would continue to ensure that lessons were learned from patient and staff experiences and communicate these to staff accordingly.</p>	

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	<p>Approval: The Trust Board received the report as assurance that Significant Incidents/Lessons Learned were being effectively monitored and addressed.</p>	
4.4	<p>For Approval: Annual Organisational Audit (Medical Doctors' Registration) The report provided assurance to the Board that the systems and processes underpinning revalidation of medical Doctors in YAS' employ were in place and working effectively, and that every licensed Doctor's fitness to practise was monitored and assessed on a regular basis.</p> <p>The Trust employed fifteen Doctors, and had honorary contracts with a further nineteen as members of the YAS' British Association for Intermediate Care (BASICS) scheme. The Board noted YAS was the main employer for only three of these staff: the Executive Medical Director, the Executive Director of Operations and the Deputy Medical Director. The Executive Medical Director had been appointed the Responsible Officer for YAS in January 2015 and therefore his 'Prescribed Connection' was with NHS England (North).</p> <p>The two employed Doctors that the Trust had a Prescribed Connection for had been re-validated and were of good-standing. It was also confirmed that there were no performance concerns with the BASICS Doctors.</p> <p>It was confirmed that the Executive Director of Quality, Governance and Performance Assurance was responsible for Nursing revalidation.</p> <p>Approval: The Board accepted the report and understood that the document, the Statement of Compliance and the Annual Audit would be shared with the NHS England higher level Responsible Officer.</p> <p>The Board approved the Statement of Compliance confirming that the Trust, as a Designated Body, was in compliance with the regulations.</p>	
4.5	<p>For Approval: Resilience and Special Operations Half Yearly Report The report provided an update and assurance to the Board on the Emergency Preparedness Resilience and Response (EPRR) work streams.</p> <p>The issue of the Trust's continued and increasing involvement in Safety Advisory Groups (SAGs) was discussed.</p> <p>Discussion took place around whether the Trust should charge for its advice for commercial events. The Board noted there was a statutory function element in this regard and therefore charging may not be feasible, and that some Local Authorities and Police Authorities charged for similar advice.</p> <p>The Board also noted the Business Continuity Team had received recertification of ISO22301 in March 2016.</p>	

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<p>The Board noted that Special Operations were in a state of readiness within the context of the atrocities that had taken place in Europe and the wider world.</p> <p>The Board was reminded that the former Chairman had been the Accountable Emergency Officer for YAS and that the vacant role would be assumed by the Chairman in the interim.</p> <p>Discussion took place around the voluntary nature of the Ambulance Intervention Team (AIT) in context of the requirements of the NHS Emergency Preparedness Resilience and Response (EPRR) Core Framework and YAS' compliance against this. The Board was assured the Trust had an adequate level of assurance in this regard whilst it was acknowledged there was more work to do to increase the robustness of AIT.</p> <p>Approval: The Board accepted the report and gained assurance of the Trust's compliance and progress of the EPRR agenda.</p>	
<p>4.6 For Assurance: NHS Staff Survey Results The Board received the results of the 2015 NHS Staff Survey along with an overview of the key themes and findings.</p> <p>It was intended that the Trust would undertake a survey of all staff in September and this would give the Trust a benchmark for future surveys.</p> <p>The national NHS Staff Survey showed a slight increase in the staff engagement indicator for YAS. The less positive results largely replicated those that had been reported in previous years. The Board noted there was action planning around these to improve those results.</p> <p>Discussion took place around the Personal Development Review (PDR) process and how the Trust intended to enhance the quality of the review discussions.</p> <p>Approval The Trust Board noted the results of the Staff Survey 2015.</p>	
<p>5 STRATEGY, PLANNING AND POLICY</p>	
<p>5.1 For Approval: Auditor Panel Draft Terms of Reference Approval: The Trust Board approved the Terms of Reference for the Auditor Panel.</p>	
<p>5.2 For Discussion/Feedback: Consultation on the Draft Improvement Single Oversight Framework The Board was advised that the current NHS Improvement (NHSI) consultation deadline was 4 August 2016.</p> <p>The proposed framework set out:</p> <ul style="list-style-type: none"> • The main areas of focus in overseeing Trusts; 	

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<ul style="list-style-type: none"> • How information would be collected from Trusts; • How potential concerns with a Trust's performance would be identified; • How the Trust sector would be segmented according to the level of challenge each Trust faced, and <p>NHSI would identify where Trusts may benefit from, or require, support in the key areas of quality of care, finance and use of resources, operational performance, strategic change and leadership and improvement capability.</p> <p>The Board noted there was little reference to Commissioners within the consultation or acknowledgement of the relationships between the different elements of the health community. Nor was there was reference to NHS 111 within the consultation.</p> <p>The Board agreed YAS' response would be part of a collective response through the Association of Ambulance Chief Executives (AACE).</p> <p>Action: To circulate the key points within YAS' response to Trust Board members.</p> <p>Approval: The Trust Board noted the update.</p>	SP
<p>5.3 For Assurance: West Yorkshire Tri-Service Collaboration Programme Board</p> <p>The report provided the Board with assurance of the ongoing development of the West Yorkshire Tri-Service Collaboration Programme Board.</p> <p>The Board noted YAS already had a level of collaboration with West Yorkshire Police and West Yorkshire Fire and Rescue Service. Following the introduction of the Policing and Crime Bill policy had been to formalise this between the three agencies. The Board noted the governance arrangements needed to be developed and that prior learning from the Northern Ambulance Alliance collaboration would be considered.</p> <p>The Board agreed the need to ensure that the Trust had clarity about the outcomes of collaboration and also the amount of work involved to deliver those outcomes.</p> <p>Approval: The Trust Board noted the update.</p>	
<p>6 PERFORMANCE MONITORING</p>	
<p>6.1 Charitable Funds Committee – Minutes of the last two meetings held on 22 March and 21 June 2016 and Chairman's Verbal Update of the meeting held on 19 July 2016</p> <p>The Board received the minutes of the meetings held on 22 March and 21 June 2016.</p> <p>JM expressed his thanks to the Charitable Funds Committee for supporting the ongoing funding for the British Association for Intermediate Care</p>	

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<p>(BASICS) equipment.</p> <p>EM provided a verbal update of the meeting held on 19 July which had considered risk management arrangements for the charity.</p> <p>Approval: The Trust Board was assured by the discussions within the Charitable Funds Committee and the key issues highlighted for further scrutiny within the Committee’s work programme.</p>	
<p>6.2 Audit Committee – Minutes of the last two meetings held on 7 April and 31 May 2016 and Chairman’s Verbal Update of the meeting held on 7 July 2016 and Audit Committee Annual Report 2015/16</p> <p>The Board received the minutes of the meetings held on 7 April and 31 May 2016.</p> <p>The Board noted the Audit Committee Annual Report 2015/16 had been considered and agreed by the Audit Committee on 7 July 2016.</p> <p>BS provided a verbal update of the meeting on 7 July and advised that the Committee continued to receive assurance from the relevant sources including the Finance and Investment Committee and the Quality Committee.</p> <p>Approval: The Trust Board was assured by the discussions within the Audit Committee and the key issues highlighted for further scrutiny within the Committee’s work programme. The Trust Board noted the Audit Committee Annual Report 2015/16.</p>	
<p>6.3 Quality Committee: Minutes of the meeting held on 12 May 2016 and Chairman’s Verbal Update of the last meeting held on 14 July 2016</p> <p>The Board received the minutes of the meetings held on 12 May 2016.</p> <p>PD spoke of the sad passing of Dr Kate Granger. The Trust Board expressed their sympathies to Kate’s family and friends.</p> <p>PD provided a verbal update from the meeting on the 14 July and advised that the Quality Committee continued to monitor the Board Assurance Framework and the Corporate Risk Register. In addition to some of the regular reports received there had also been a focus on sickness absence and equality and diversity.</p> <p>Approval: The Trust Board was assured by the discussions within the Quality Committee and the key issues highlighted for further scrutiny within the Committee’s work programme.</p>	
<p>6.4 Finance & Investment Committee: Minutes of the meeting held on 12 May 2016 and the Chairman’s Verbal Update of the last meeting held</p>	

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<p>on 14 July 2016 The Board received the minutes of the meeting held on 12 May 2016.</p> <p>MW provided a verbal update of the meeting of the 14 July. The meeting had focused on assurance; there were some areas where the Finance and Investment Committee (F&IC) had received limited assurance: the PTS Transformation Plan and financial objectives, and the achievement of the Trust's financial control total. The Capital Plan had seen some slippage.</p> <p>RDT updated the Board on some of the mitigations being put in place to ensure that the Trust achieved the financial control total. It was agreed that the finance report produced for TEG would be circulated to Board members for information.</p> <p>Action: To circulate the TEG finance report to Trust Board members.</p> <p>Approval: The Trust Board was assured by the discussions within the Finance and Investment Committee and the key issues highlighted for further scrutiny within the Committee's work programme.</p>	RDT
<p>6.5 Board Review and Feedback: Board Vital Guiding Principles T – timely, accessible communications R – respect differences; be supportive U – understand shared purpose, risks S – self-awareness; give/receive feedback; time for reflection T – take responsibility; challenge</p> <p>The Chairman thanked all those present for attending the meeting.</p> <p>The Chairman summarised the discussions that had taken place at the meeting.</p> <p>She apologised for the issue that had occurred with the Patient Story and advised that a transcript of the video would be circulated.</p> <p>The meeting ended at 1315 hours.</p>	
<p>7. REGULATORY REPORTS</p>	
<p>There were no Regulatory Reports.</p>	
<p>8. FOR INFORMATION</p>	
<p>YAS Forum Report of the last meeting held on 17 May 2016. The Board received the report for information.</p>	
<p>To be resolved that the business to be transacted is of a confidential nature and that under the terms of the Public Bodies (Admission to Meetings) Act, 1960, Section 1, subsections 2&3, the Press and the public to be excluded from this part of the meeting.</p>	

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9.	<p>Date and Location of the Annual General Meeting and Next Meeting of the Trust Board Held in Public: 27 September 2016 National Coal Mining Museum for England, Caphouse Colliery, New Road, Overton, Wakefield, WF4 4RH</p>	

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

_____ **INTERIM CHAIRMAN**

_____ **DATE**

DRAFT