



An Aspirant Foundation Trust

Extraordinary Trust Board Meeting held in Public

Venue: Kirkstall and Fountains, Springhill 1, Wakefield, WF2 0XQ

Date: Tuesday 2 June 2015

Time: 1130 hours

Chairman: Della Cannings

Present:

Board	Mem	bers:

Della Cannings	(DC)	Chairman
Rod Barnes	(RB)	Chief Executive
Erfana Mahmood	(EM)	Non-Executive Director
Barrie Senior	(BS)	Non-Executive Director
Mary Wareing	(MW)	Non-Executive Director
Alex Crickmar	(AC)	Interim Executive Director of Finance and Performance
Dr Dave Macklin	(DM)	Executive Director of Operations
Dr Julian Mark	(JM)	Executive Medical Director
Steve Page	(SP)	Executive Director of Standards and Compliance

Apologies:

Patricia Drake	(PD)	Deputy Chairman and Non-Executive Director
Dr Elaine Bond	(EB)	Non-Executive Director
Ian Brandwood	(IB)	Executive Director of People and Engagement

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In Attendance:

John Nutton	(JN)	Non-Executive Director (Designate)
Anne Allen	(AA)	Trust Secretary
Shelagh O'Leary	(SOL)	Associate Director, Organisational Effectiveness &
		Education
Luke Playford	(LP)	Committee Services Apprentice

Minutes produced by: (MG) Mel Gatecliff, Committee Services Manager

		Action
	The meeting commenced at 1130 hours.	
1	Apologies / Declaration of Interests The Chairman welcomed everyone to the meeting.	
	Apologies were noted as above and declarations of interest would be considered during the course of the meeting.	

		Action
	The Chairman stated that the meeting would have been EB's last as a Non-Executive Director (NED). EB was currently on leave so the Chairman had arranged to meet her for lunch on her return to say a formal farewell. The meeting would therefore be JN's last meeting as NED (Designate) as he would become a NED on 5 June.	
2	Minutes of the Meeting held on 3 June 2014 The Minutes of the Meeting held on 3 June 2014, which had been circulated for information, were noted with no further amendments.	
3	QUALITY, SAFETY AND PATIENT EXPERIENCE	
3.1	Annual Report – 2014/15 RB presented for approval the final draft of the 2014/15 Annual Report and Financial Summary, which had been prepared in accordance with the requirements of the Department of Health Group Manual for Accounts 2014/15.	
	The Chairman expressed concern that similar issues to the previous year in terms of the slippage of timescales and typographical errors had been encountered during the preparation of the Annual Report.	
	BS stated that the Audit Committee had also expressed concern that the timetable had slipped once more. According to the timetable, Trust Board comments were due w/c 4 May but BS had only received his copy of the draft at the Board meeting on 26 May.	
	BS further stated it was the Committee's belief that the Trust needed to work smarter and introduce, for example a thorough proof reading process to ensure that a detailed review took place prior to the Report being circulated to Board members for comment. The many typographical errors which were a constant distraction when trying to review the substance of the Report.	
	RB apologised for the slip in timescales. He stated that, in terms of content and format, the draft was better than the previous year's whilst acknowledging that there were still a number of typographical errors and minor inaccuracies that needed correcting.	
	RB confirmed that, in addition to the errors which he had picked up himself, feedback had also been received from the Audit Committee. All comments would be addressed as soon as possible.	
	The Chairman asked whether there were any omissions in the draft.	
	EM stated her belief that more information could have been included about the Trust's Charitable Funds.	
	RB stated that he had already listed this as a point to action. For example, Charitable Funds had purchased its second Community Medical Unit the previous year of which there was no mention.	

RB stated that the Trust's three national Ambulance Leadership Forum (ALF) awards needed to be highlighted, as did the We Care Awards. He further stated that that, although there had been good coverage of some resilience work such as the ASDA partnership working, there were other areas that could have been included.

SP stated that reference to the ALF winners in the Quality Account, would be seen when the two documents were edited together. It was his belief that co-ordination of the whole process needed to improve.

BS stated that comments from External Audit echoed the previous year. They suggested that the Trust could place more emphasis on the success of its Cost Improvement Programme, an extraordinary achievement considering the financial issues faced by others.

SP stated that more emphasis should be placed on the Trust's public focus, setting it in context and highlighting how it related to operational performance, quality, etc.

The Chairman suggested that more emphasis could be placed on the Trust's efforts in terms of the modernisation of its services, selling its efforts in terms of efficiency and effectiveness.

Taking into account the amendments that were still required, the Chairman asked what timescales were realistic for the final sign off of the Annual Report.

AC reminded Board colleagues that External Audit would need to provide a final view on the additional changes.

SP stated that colleagues should be cognisant of the external sign off deadline of 8 June, adding that the Quality Account was due to go to the printers for publication on 30 June.

AC stated his belief that the changes suggested would not alter External Audit's current view of the Annual Report. However, they would need to see the amended version before the end of the week.

BS stated that he had suggested quite a number of changes but nothing major.

The Chairman suggested that the revised draft should be circulated to the Board by Thursday, 4 June for final comment.

BS asked whether the revised draft could be circulated in track changes for ease of reading.

RB replied that he would ensure that Corporate Communications highlighted any changes in the final draft.

		Action
	th Corporate Communications re content of nd instructions for circulation to Board members.	RB
process of the A recommendatio and include NEI	stressed the urgent need to revise the production Annual Report for the following year. It was her in that the process should commence in January 2016 D involvement from the start with the Board able to ft by the end of April 2016.	
dependent on o	noted that the current process seemed very ne person in the Corporate Communications team ir as it needed more of an organisational approach.	
RB should inclu	to be the NED representative so it was agreed that de BS in any discussions relating to the planning production of the 2015/16 Annual Report.	
	3S involvement in the planning process for the the 2015/16 Annual Report.	RB
whether it would summary version	ad asked in that morning's Audit Committee meeting do be possible for the Trust to produce an abridged on of the Annual Report and Accounts, which might be the summary version of the Quality Account.	
	e was no reason technically why this could not ust a matter of co-ordination.	
produce a versi	stated she would be delighted if the Trust could on which could be submitted to the Plain English in a crystal marking for YAS.	
And the second s	nat RB would liaise with Corporate Communications book into this further prior to compiling the abridged nnual Report.	
	th Corporate Communications team re producing on in line with the requirements of the Plain aign.	RB
draft of the An	rd reviewed the content and approved the final nual Report 2014/15 subject to the insertion of ng figures when they became available and any to the narrative requested by members of the	

3.2 Annual Accounts & Disclosure Statements – 2014/15

AC presented the Annual Accounts for 2014/15. He confirmed that, as outlined in the cover paper, the Trust had achieved each of its statutory duties, which were:

- Breakeven Duty;
- · External Financing Limit;
- Capital Resources Limit.

In addition to achieving its planned surplus position, the Trust had hit its Better Payment Practice Code, for the first time.

AC stated that a £416k misposting, which would in essence increase expenditure by that amount, would have no impact on the final accounts. The mistake, which had been discussed in depth at the Audit Committee meeting, was currently being rectified by the Finance team and would then go to External Audit for sign off.

AC stated that a page by page review of the Annual Accounts had taken place the previous week at a meeting between External Audit and the NEDs. Additional queries, raised by those NEDs who had been unable to attend the meeting, had also been dealt with.

BS stated that the NED's pre-meeting, which had not included the Chairman, had assisted Audit Committee members in their review of the Annual Accounts in preparation for that day's Audit Committee meeting at which the Committee formally agreed to recommend that the Trust Board should approve the Accounts.

He further stated that there were no material outstanding matters to bring to the attention of the Board, adding that the Audit Committee had publically thanked the Finance team for their hard work and External Audit for the help they had provided in preparing the Annual Accounts.

BS stated that there had been a very clear year-end close down process. The production of the Annual Accounts had gone smoothly and the External Auditors, Deloitte, had been complimentary about the work done by AC and the Finance team.

AC stated that the wording of the disclosure about the Hillsborough Inquest in note 1.5 on page 10 had been agreed with External Audit.

EM stated that she did not think that it could be avoided as the information was in the public domain.

RB stated that, in any period when the NHS was under financial pressure, there would always be more challenge in terms of judgements made, etc. Given current national and local pressures it was his belief that to get that level of audit assurance was a really good result.

Action

EM stated that the two challenging areas of Hillsborough and A&E penalty implementation had been managed very well and proactively showing that the Trust now had a much better commercial understanding than had been the case historically.

The Chairman asked why YAS was underspent on its capital budget.

AC replied this was partly because there had been a delay around the ordering of replacement vehicles and partly because the Trust Development Authority (TDA) had asked YAS to underspend.

The Chairman asked whether the Board had been advised about the TDA request.

AC replied that it had not, as it was not a significant amount and was not over the Standard Financial Instructions (SFI) limits. However, he acknowledged with hindsight that perhaps he should have brought it to the Board.

The Chairman asked whether there would be any direct impact on YAS in terms of projects being delayed, etc, as she did not feel comfortable about the request.

AC replied that there would be no significant impact.

The Chairman stated that it would be helpful if AC could share more detailed information about the request outside the meeting.

Action:

AC to share detailed information about the TDA request for YAS to underspend on its capital budget outside the meeting.

Approval:

Subject to completion of the above amendments, the Trust Board signed off and approved the 2014/15 Annual Accounts having gained sufficient assurance of their accuracy and completeness.

3.3 Quality Account - 2014/15

SP presented the 2014/15 Quality Account for approval.

He stated that the document had been through the usual process of development, with two rounds of external consultation. The final draft included comments and feedback from Commissioners, Scrutiny Committees and associated Healthwatch organisations. In addition, comments and amendments from YAS' external auditors Deloitte had also been incorporated.

The amendments had been made to the document on an on-going basis as it had passed through the consultation process.

AC

SP stated that some external stakeholder comments had been supported by face to face discussions. Although amendments had been made to the document when possible or extra narrative added to include multiple stakeholder comments, it had been impossible to reflect all comments, particularly as some were conflicting.

SP confirmed that additional amendments had been received at that morning's Audit Committee meeting. This included the reference to union re-recognition being completed in May 2015, the date of which would need to change as it had shifted slightly to June 2015.

In addition, BS had provided some formatting and presentation feedback on which the team was currently working.

BS stated that none of his comments were of a substantial nature.

He further stated that Deloitte had undertaken a review of the Quality Account as if YAS was already a Foundation Trust (FT) and some useful feedback had been received.

SP stated that, overall, the feedback had been positive and Deloitte had been satisfied that there had been a good representation of information. A national and a local indicator had also been reviewed. The national indicator had been of an acceptable standard but the findings in terms of the local indicator, the Paramedic Pathfinder, had found some discrepancies in data collection. The indicator was still at a developmental stage and the data collection had been paper rather than IT-based. Deloitte's recommendations had been responded to and since then the roll out of the new 'App' was already helping in terms of data collection.

JM confirmed that the development and implementation process had fulfilled all of External Audit's recommendations.

SP stressed that Deloitte had fed back in the spirit of supporting the further development of the Quality Account; nothing beyond that.

He stated that the document was relatively long compared to other trusts but the fact that YAS had such a wide range of stakeholders contributed to this. The Trust would continue its development work until the Quality Account contained the right balance of detail.

The Chairman stated that she would not want to produce a shorter document if this meant that the Trust missed out some of its valuable stakeholder feedback.

In terms of feedback, SP stated that although there were some learning points, the overall tone had been positive and supportive.

BS stated that the Deloitte report also offered some helpful testing questions in terms of data quality, etc for the Trust to consider.

		Action
	It had been agreed that AC and SP would consider the questions and provide a response to each of them at a future Audit Committee meeting as a useful further mapping of assurance.	Addion
	RB asked why the number of Emergency Care Practitioner (ECP) referrals in the table on page 57 had dropped from 248 in 2013/14 to 1 in 2014/15.	
	SP replied it was probably due to the 'rebadging' of the ECPs but he would double check and include a suitable narrative to explain this.	
	Action: SP to check the reason for the drop in ECP referrals from 248 to 1 and include narrative in the document to explain the drop.	SP
	The Chairman stated that the Quality Account was a well laid out, readable document which contained some useful information. She asked SP to pass on her thanks and congratulations to everyone who had been involved in its production, adding that she looked forward to seeing the abbreviated version of the document.	
	Approval: Subject to final amendment The Trust Board received and signed off the Final Draft of the 2014/15 Quality Account and approved the Quality Account to progress through the Quality Assurance Process.	
3.4	Annual Governance Statement – 2014/15 RB presented the Annual Governance Statement (AGS) for the financial year 2014/15. He stated that the document had been considered by the Audit Committee which, subject to a number of minor amendments, had received, accepted and supported the AGS, prior to its endorsement by the Trust Board.	
	RB stated that the AGS drew out the main risks in relation to the Board Assurance Framework (BAF) and the major challenges faced by YAS in-year. It gave significant assurance on the Internal Audit programme, confirming that limited assurance reports had been escalated to the Board as appropriate.	
	BS highlighted the changes requested by the Audit Committee, none of which were substantive.	
	AC stated that the Trust's important risk of not meeting its Red 1 and Red 2 performance targets had not been included in the bullet point list on page 10 of the document.	

Page 8 of 10

SP to amend AGS to include the risk of the Trust not meeting its SP Red 1 and Red 2 performance targets.

Action:

		Action
	SP stated that the draft had already been to External Audit and the Trust Development Authority (TDA) and feedback had been received from both organisations as part of the process before final sign off.	
	BS stated his belief that the document provided a lot of assurance about the high quality of governance within YAS which a lot of other organisations still aspired to.	
	RB thanked SP for compiling the AGS on behalf of himself and the Executive team.	
	Approval: The Trust Board received and accepted the Annual Governance Statement 2014/15 subject to completion of the amendments already discussed and agreed at Audit Committee.	
3.5	Letter of Representation to External Audit AC presented the Letter of Representation to be submitted to the External Auditors with respect to the 2014/15 Annual Accounts.	
	He confirmed that the standard letter, which had been tailored slightly for YAS, had been considered by the Audit Committee. Subject to a few minor amendments, including all reference to 'the company' being changed to 'the trust', the Audit Committee had supported the Letter going to the Trust Board for formal approval of its content, to be issued to the Auditors on 2 June 2015.	
	AC confirmed that the letter had been amended and was now ready for signature.	
	The Chairman asked whether it was appropriate for both the Chairman and RB, as Accountable Officer to sign the Letter, as it was her belief that it was usually only signed by the Chief Executive.	
	AC replied that he would take the Letter back and confirm who should sign it.	
	Action: AC to confirm who should sign the Letter of Representative and re-issue the amended Letter.	AC
	Approval: The Trust Board approved the content of the Letter of Representation, to be issued to the Auditors on 2 June 2015.	
3.6	External Audit Report For Those Charged with Governance AC introduced the Final External Audit Report to the Audit Committee on the audit for the year ended 31 March 2015. He stated that the External Audit/NED meeting the previous week had gone through the report page by page, adding that no questions had been	

AC stated that Deloitte anticipated issuing a clean, unmodified opinion and had confirmed that the Trust's audit process had continued to improve during 2014/15.

The Hillsborough Inquests had been picked out for specific mention although the 'heat' chart on page 6 of the report was comparable to the previous year's chart.

AC stated that there had been no significant issues in terms of Value for Money (VfM) and Deloitte had made very positive comments about the Trust's achievement of its Cost Improvement Programme.

BS stated that, although it was a very clean report, he had expressed his disappointment to External Audit during the Audit Committee meeting about the fact that they had not brought to the Trust's attention a £416k error, even though there was no material outcome.

If the income and expenditure issue had not been dealt with it would have meant that the Trust's training and education expenditure would have been significantly under-reported which could, for example, have led to difficult questions when the Annual Accounts were presented at the Annual General Meeting.

Approval:

The Trust Board noted and received the External Audit Report for the year ended 31 March 2015.

AC stated that the year-end activity had been a challenging experience, especially taking into account the other pressures that his team were under at the same time. He placed on record his thanks to the Finance team for all of their efforts at a difficult time.

The Chairman stated that it was also a credit to AC, who had built on the hard work of the previous Executive Director of Finance & Performance.

The Chairman thanked everyone for attending. The meeting closed at 1215 hours.

4 Date and Location of Next Meeting:

28 July 2015 at The Garden Rooms, Tennants, Harmby Road, Leyburn, North Yorkshire, DL8 5SG

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

CHAIRMAN

DATE