

Chairman's Office
Yorkshire Ambulance Service
Bindley Way
Wakefield
30th July 2012

Dear Board Colleague,

Chairman's Report for 30 July 2012

In the future as a Foundation Trust it will be essential to ensure quality and timely communication between the Board and the Council of Governors, each with their differing roles, and I am looking to do just that via a Chairman's Report to each prepared near to the meetings so that it is up-to-date. Timely communication of information that provides transparency and accountability is important: this may break with traditional methods and look to maximise the use of technology.

I do not intend that the Chairman's Report duplicates information that is provided elsewhere nor that it sets out my diary commitments undertaken since the last Board held in public. I hope that the report is found to be useful and I look to receive feedback so that it can develop to be as useful as possible, but still succinct.

I have asked the Chief Executive Officer (CEO) to explore ensuring that Board meetings in public are made available via website 'live-streaming' facility. The NHS National Commissioning Board is using the technology and so look at their website to see its use.

Association of Ambulance Chief Executives (AACE).

You are aware that the Association has been formed and is a public company limited by guarantee. The members forming AACE are the 11 Ambulance Trusts of England represented by their Chief Executives.

In greater detail AACE is to provide a structure to co-ordinate, manage and implement key national work programmes, policies that are fundamental to the ongoing improvement of the ambulance services in England and the development of patient care. It exists to support its members in delivery of their roles including for patient care, operational policy development and emergency preparedness. Further, it can provide a central resource of information about NHS ambulance services including for the public and stakeholders. Clearly the Chief Executives working together can be influential nationally with stakeholders.

As you are aware I am a Director of AACE. I have now been appointed the Deputy Chairman. The current Chairman is Peter Bradley, CEO London Ambulance Service, who retires later this year after a long and distinguished service. From tomorrow the new Chairman is Anthony Marsh, CEO West Midlands Ambulance Service.

Tri-partite Formal Agreement (TFA) and the Single Operating Model Self-Certification.

A self-certification report is being introduced under the Single Operating Model to ensure consistency of approach across the country to the application process for aspirant Foundation Trusts. There are two main components of the process - a self-certification return and monthly oversight meetings that will replace the current Quarterly Assurance meetings between the Executive and the NHS SHA North of England (as umbrella organisation including SHA Yorkshire and Humber). The self-certification will be used by the SHA as part of the information to guide the monthly oversight meetings. The self-certification covers the following areas:-

TFA progress

Financial performance

Governance

Quality

Contractual information

Board Statements

Much of this information is already reported, albeit in a different format, to the SHA already. The SHA have requested that the self-certification is completed in 'shadow form' for June with formal returns (approved by Full Trust Board) commencing from July data (i.e. return to be submitted in August). The SHA have confirmed that full Board approval is not required for the June return - but Chair and CEO sign-off is required. As our Board do not meet formally monthly the SHA are being advised that the CEO and I will sign off the returns and ensure reported to the Board. Their agreement is awaited on this.

At our Board Development meeting on 8 August 2012 the process will be fully discussed along with the return for June. It will be noted that the return is geared to Acute Trusts and requires adaptations and careful reading with regards Ambulance Trusts.

Yorkshire Ambulance Service NHS Trust (YAS) Non-Executive Directors (NED)

We have formally welcomed Erfana Mahmood to the Board replacing Nina Wrightson as a NED and Mary Wareing as a NED Designate, in preparation of meeting the requirements of our Foundation Trust constitution.

Richard Roxburgh, a NED for the past six years, is retiring on 31 July 2012. I formally thank Richard for all that he has done as a NED and particularly in his role as the Audit Chairman.

I am holding interviews today to be able to recommend to the Appointments Commission a replacement NED. There have been seven applicants and three qualified people have been short-listed for interview. The Appointments Commission meet on the 15th August 2012 to consider the Panel's recommendations and so it is envisaged our new NED, who will be Audit Chairman, will start on the 16th August 2012. In the interim, it is recommended to the Board that my Deputy Chairman, Pat Drake, chairs the Audit Committee. In the absence of an accountancy qualified NED to undertake the role for the two weeks, I have asked that the CEO ensures that there is independent accountancy advice available to Pat for the period and including for the next Audit Committee meeting. Additionally there will be a paper to the Committee so it can ensure that governance rigor can be retained prior to the new appointment.

1. I ask the Board to agree that Pat Drake is the interim Audit Committee Chairman.

With Roger Holmes (NED) retiring on 30 September 2012 we have the approval of the Appointments Commission for Mary Wareing to replace his position. So, the current NED recruitment drive has included the advertisement for a new NED Designate. This campaign received 36 applicants and the short listing has led to six candidates called for interview for Thursday 2nd August 2012. The recommendations of the Panel will go to the Appointments Commission for decision on the 15th August 2012.

With the current 'refresh' of the Board it is necessary to reconsider the membership of various Committees and specific roles. The NEDs have considered this and Appendix A is a summary of their recommendation to the Board, to include Senior Independent Director, Committee memberships and provisions for the end of September. This will be reviewed again when the new NED is appointed if necessary.

2. I ask the Board to agree the recommended appointments.

Quality

A recent press report relating to another ambulance service indicated that there had been a delay in response to an incident as the nearest available staff were on a meal break. I ask that the CEO confirms this would not happen in Yorkshire? I look to staff in an emergency service to be flexible: they work for us as they care and, like us wish to save lives.

I am pleased that the establishment of the Quality Committee has taken effect and has a robust work plan. As you are aware at most Board meetings we do receive the information on significant adverse events and that this is now looked at in greater detail at the Quality Committee. I include for completeness these as reported at the last Quality Committee for the period 1 May to 25 June 2012.

Three Serious Incidents were reported:-

- A delay in responding to a 34 year old patient who was choking. The patient died. A full investigation is under way, with a focus on the call grading process.
- A delay in responding to an 82 year old patient who was choking. The patient died. A full investigation is under way, although initial review suggests that the incident was as a result of human error. The member of staff is being given additional training prior to return to routine work.
- A delay in responding to a patient due to the incident changing dispatch bay area. The patient died. The investigation is under way but not yet complete. Initial indications are that the incident relates to a specific aspect of the process for allocation and flagging of calls to dispatchers. The Emergency Operations Centre team are exploring possible solutions to the issue.

A review is currently being conducted of the Serious Incidents and other adverse events reported in the Emergency Operations Centre. This review is considering any emerging themes and additional action which may be required to address root causes, beyond the actions already agreed in response to individual incidents.

As you are aware all serious incidents are subject to full investigation and root cause analysis and where necessary, immediate actions are taken to address risks to patient safety. More detailed action plans are put in place to tackle underlying causes following the completion of the investigation process. Also, of course, consideration is given in each case to the process for contacting the patient's families. All contacts with families about Serious Incidents are tracked through the Incident Review Group in line with the Trust's Being Open policy. For completeness, I report the Trust received one notification from the Information Commissioner's Office (ICO) in May-June regarding a complaint made to the ICO about a subject access request. This issue has now been resolved. No Coroner Rule 43 letters or other serious concerns from external regulatory bodies were received during this period. Clearly we ensure we are benchmarked nationally and gain from the Lessons Learnt of other ambulance services.

Trust Board meetings held in private.

We have clear criteria as to when it is necessary to hold a Board meeting in private and have recently reviewed these. We aim to conduct as much business as possible in public.

In recent Board meetings in Private we have discussed:

- 111 tender. We have now been selected as the preferred provider.
- Draft Annual report
- Purchase of Headquarters Buildings, supported by SHA Yorkshire and Humber and the Department of Health.
- The contracting of a private supplier to assist with the development of our Patient Transport Service.

Other

- I attended the Summer Reception of the High Sheriff of South Yorkshire;
- I attended the Summer Reception of the High Sheriff of North Yorkshire - this was held on a steam train from Grosmont to Pickering and return with a picnic. I took the opportunity to speak with those on board and provided application forms for Foundation Trust membership. This was well received.
- I encourage colleagues to assist in the development of a strong and representative Foundation Trust membership base. The time is now right to 'push' this with colleagues, friends, professional contacts etc.
- Last month I was a patient on one of our ambulances following an incident. I can only praise the staff for their professionalism and manner - it was excellent.

I thank all for their on-going support.

A handwritten signature in blue ink, appearing to be 'D. J. ...', with a small circular stamp containing the initials 'PH' below it.

Chairman

Appendix A

	DC	PD	RH to 30.09.12	EB	MW	EM	X NED	Y NED Designate	
Trust Chairman	✓								
Audit Committee		✓	✓	✓	✓	✓	✓		Interim C/Man Pat Drake
Quality Committee		C/Man		✓		✓			
Finance and Investment Committee		✓	C/Man	✓ Chairman from 1.10.12	From 1.10.12		Observer As Audit Chairman		
Charitable Funds Committee				✓		✓			Chair changing to EM
Raising Concerns at work	✓		✓	✓					Need to appoint new NED Sept
Deputy Chairman		✓							Use term Deputy
Designate					✓to 30.9.12			From 1.10.12	
RTSC	C/M	✓	✓	✓	From 1.10.12	✓	✓		
S I D						✓			
Local security management			✓						Need to consider replacement
PCT Cluster	All	CKW	Y and NY	Humber	S Yorks	ABL	?	?	CCGs in future