



**Trust Board Meeting held in Public**

**Venue:** Kirkstall and Fountains, Springhill 1

**Date:** 13 September 2012

**Time:** 0945 hours

**Chairman:** Della Cannings

**Present:**

**Board Members:**

- Della Cannings (DC) Chairman
- David Whiting (DW) Chief Executive
  
- Pat Drake (PD) Deputy Chairman & Non-Executive Director
- Dr Elaine Bond (EB) Non-Executive Director
- Roger Holmes (RH) Non-Executive Director
- Erfana Mahmood (EM) Non-Executive Director
- Stephen Moir (SM) Deputy Chief Executive & Executive Director of Workforce & Strategy
  
- Barrie Senior (BS) Non-Executive Director
- Rod Barnes (RB) Executive Director of Finance & Performance
- Steve Page (SP) Executive Director of Standards & Compliance
- Paul Birkett-Wendes (PBW) Executive Director of Operations

**In Attendance:**

- Karen Kanee (KK) Head of Foundation Trust Development (Assistant Trust Secretary)
- Caroline McKenzie (CM) Member of public (Paramedic South Yorkshire) (left meeting at 1120 hours)

**Apologies:**

- Alison Walker (AW) Executive Medical Director
- Mary Wareing (MW) Non-Executive Director (Designate)

**Minutes produced by:** (JK) Jo Kane (Executive PA to Chairman and NEDs)

	<b>Action</b>
The meeting commenced at 0950 hours.	
The Chairman welcomed Caroline McKenzie to the Trust Board Meeting held in Public. Caroline was a new member of staff who had joined the Trust as a paramedic in South Yorkshire from South East Coast.	

		<b>Action</b>
	<p>The Chairman explained that the meeting was an Extraordinary Trust Board meeting held in Public to deal with peak business prior to the next Board meeting held in Public to be held on 25 September 2012.</p> <p>The Chairman briefed the Board on the findings of the Hillsborough report issued Wednesday, 12 September 2012.</p> <p><b>Action:</b>  <b>JK to issue the Hillsborough Independent panel report to Non-Executive Directors.</b></p> <p>The Chairman raised the issue of pre-planned public events and how it was easy to get into a routine. She asked whether people's roles and responsibilities within the events, both internally and externally were fully understood and that key issues had been addressed as engagement with other organisations was vital.</p> <p>It was agreed that the organisation needed to use the report as a source of learning for the future.</p> <p>PBW briefed the Board on an example of an unplanned event which YAS had picked up. Skipton Music Festival had been held on the 18/19 August with around 5000 people in attendance. The event had been awarded to a private medical company which, at short notice, had failed to provide sufficient cover. As a result of this YAS had sent 8 front line staff to the event.</p> <p>PBW informed the Board that he had emailed the Strategic Health Authority (SHA) raising his concerns about the event and they had agreed to follow up with the Care Quality Commission (CQC).</p> <p>PD asked how and when YAS triggered local major incident plans. DW replied that he was confident that all the Trust's commanders were trained and undertook appropriate exercise training.</p> <p>The Chairman pointed out that communications had moved on since the Hillsborough events ie Airwaves/Terrafix.</p>	<p><b>JK</b></p>
	<p><b>Questions from member of public</b></p> <p>The Chairman invited questions however none were raised.</p>	
<p>1</p>	<p><b>Apologies/Declaration of Interests</b></p> <p>Apologies had been received as listed above and declarations of interest would be noted and considered during the course of the meeting.</p>	

		<b>Action</b>
2	<p><b>Minutes of the meetings held on 31 July 2012 including Matters Arising (not on the agenda) and Action Log</b></p> <p>The minutes of the meeting held on 31 July 2012 were approved as a true and fair representation of the meeting subject to the amendments highlighted below:</p> <p>Page 1 - paragraph 7 - Shelagh O’Leary – job title to be changed to Associate Director of Organisational Effectiveness &amp; Education (Designate).</p> <p>Page 9 – 6.3 paragraph 5 – should read, on behalf of Executive Medical Director, Dr Alison Walker.</p> <p>Page 20 – paragraph 2 – should read the CIP delivery would be presented in more detail the following month.</p> <p><b>Matters Arising:</b> There were no matters arising.</p> <p><b>Action Log:</b> PB -124 – Research &amp; Development Annual Report went to Quality Committee on 6 September 2012 – closed item</p> <p>PB – 126 – Performance Management Strategy – circulated week commencing: 5 September 2012 – closed item</p> <p>PB – 127 – Estates Strategy – issued 13 September 2012 – closed item.</p> <p>PB – 130 – Integrated Performance Report – meeting to be held on the 26 September 2012 attendees to be MW/EB/PBW – closed item.</p>	
6	<p><b>QUALITY, SAFETY &amp; PATIENT EXPERIENCE</b></p> <p>6.1 <b>For Formal Noting: Emergency Powers and Urgent Decisions: Delegated Authority for signature of NHS 111 Contract</b> DW presented a short paper outlining the above and noting that the NHS 111 Contract was signed on 7 September 2012 which was later than originally expected.</p> <p>A short discussion took place.</p> <p><b>Approval:</b> The Trust Board formally noted that, on 29 August 2012, delegated authority was sought by the Chairman and Chief Executive to exercise powers in respect of signing:</p> <ol style="list-style-type: none"> <li>1. The NHS 111 Contract between Yorkshire Ambulance Service NHS Trust and the Commissioners;</li> <li>2. The Sub-Contract between Yorkshire Ambulance Service NHS Trust and Local Care Direct.</li> </ol>	

**These powers were exercised under section 5.2, Emergency Powers and urgent decisions, and section 10.2.8 of the Trust's 'Standing Orders, Reservation and Delegation of Powers & Standing Financial Instructions' (Revised May 2012).**

DW thanked everyone for the hard work that had been put into the whole process. The Chairman added her grateful thanks and requested that this be formally noted in the minutes.

**For Assurance: 111 update – Verbal**

SP provided an update on progress in relation to the implementation of 111.

He stated that 5 March 2013 was the date scheduled for the 'soft' go live which would ensure the Trust was ready to go fully live on 19 March 2013 when the service would become available to the public.

SP confirmed that the Trust had recruited three Customer Relations Managers; 2 of which are internal and 1 external. Their start dates were to be confirmed.

He stated that there was an acknowledged risk relating to staffing issues due to the large requirement for call takers which included the transfer of staff from NHS Direct. However, mitigations were contained within the plans to this effect.

SP further stated that the Trust would be training trainers to deliver NHS Pathways.

The Chairman asked what the impact of releasing staff to train other staff would be. SP replied that he was working with PBW to ensure an efficient roll out of training, adding that trainer numbers had been kept to a minimum. He confirmed that YAS was also in discussion with other Ambulance Services and LCD re capacity.

SP stated that work had started to prepare the order for IT equipment along with organising the staff move. As the IT procurement would exceed delegated limits it would need to be signed off at Board level.

The Chairman stated that this would need to be incorporated within the Board forward plan so that the organisation did not have to use 'Emergency Powers and Urgent Decisions'. (Trust Standing Financial Instructions/Standing Orders).

**Action:**

**DW and SP to have a discussion outside of the meeting with regards to the signing of the contracts.**

**DW/SP**

The Chairman was concerned who would have responsibility at Clinical Commissioning Group (CCG) level for the 111 contracts' post Primary Care Trusts (PCTs), as the Trust needed to ensure that it had clarity around this.

	<b>Action</b>
<p>SP replied that as there was no current update, the Trust would need future arrangements clarified whilst the SHA was still in existence.</p> <p>PD raised the point about double commissioning and the tightness around communication as this has been extremely difficult. SP confirmed that formal mobilisation meetings with the SHA had been organised.</p> <p>It was agreed that, as details relating to the 111 service had not been communicated at an early stage by the Programme Board, the Trust needed to communicate to GPs and other providers what was offered within the service and how 111 interfaced with their systems.</p> <p>The Chairman expressed concern that the organisation currently relied on certain key people who possessed all of the knowledge. Going forward the Trust needed to ensure it had a wider number of people who had knowledge of the timeline, etc.</p> <p>RH asked whether the new appointees would be available to start in time for the go live in March. SP confirmed that this was the case.</p> <p>The Board formally noted and thanked SP for the update.</p>	
<p>6.2 <b>For Assurance: Board Assurance Framework including Corporate Risk Report</b></p> <p>SP stated that the purpose of the paper was to inform the Trust Board on the current position of the Board Assurance Framework (BAF) and Corporate Risk Register (CRR), and to provide assurance in regard to the effective management of risks to the strategic objectives.</p> <p>RH confirmed that at the last Finance &amp; Investment Committee (F&amp;IC) meeting on 6 September they had gone through the key financial risks and the Committee had been reasonably happy.</p> <p>RH raised a point about risks 103 and 104 on the Risk Register as they were recorded as new risks and were actually pre-existing risks.</p> <p><b>Action:</b>  <b>SP to reword risks 103 and 104 as these were not new risks.</b></p> <p><b>Action:</b>  <b>SP and BS to meet to discuss the risk management regime.</b></p> <p><b>Approval:</b>  <b>The Trust Board noted the current position and was assured in regard to the effective management of risks to the strategic objectives.</b></p>	<p><b>SP</b></p> <p><b>SP/BS</b></p>

		<b>Action</b>
6.3	<p><b>For Approval: Health &amp; Safety Annual Report</b></p> <p>SP stated that the purpose of the paper was to inform the Board on the management of Health &amp; Safety during 2011-2012 and to provide assurance that the arrangements had been managed effectively. A brief discussion took place around the key focus areas from the report.</p> <p>SP informed the Board that YAS had established a good relationship with the Health &amp; Safety Executive (HSE) inspector, Morag Irwin. He stated that the two organisations had a partnership style working relationship in place and the Inspector visited the Trust on a quarterly basis when outstanding issues would be dealt with. At present the HSE was satisfied with the Trust's arrangements.</p> <p>The Chairman stated her belief that the report only partly touched on security aspects.</p> <p>SP confirmed that in previous years a separate report had been produced that had been considered at an extra Board meeting convened to enable all annual reports to be discussed. It had been his intention to provide the report for this meeting and asked when it was scheduled to take place.</p> <p><b>Action:</b>  <b>KK to check whether the extra meeting is on the Board Planner</b></p> <p>The Chairman raised the issue of Reporting of Injuries Diseases and Dangerous Occurrences (RIDDOR) reporting as she was concerned that only just over half of incidents were being reported within the required timescales which had been highlighted as a HSE concern.</p> <p>SP confirmed that Kevin Wynn (Associate Director of Risk and Safety) had now tightened this up centrally.</p> <p>EB requested a couple of amendments to be made to the report. She stated her belief that the organisation needed to be clear why it had failed in reporting to timescales. She further stated that the report looked like an internal report and asked for improvements to be made to its future format.</p> <p>PD asked why the Emergency Operations Centre (EOC) managed their own investigations. SP confirmed that their processes were currently being integrated into the processes for the rest of YAS.</p> <p>SP stated that following much discussion, the blue response bag had been through Trust Executive Group and the new response bag solution would be implemented by April/May 2013.</p> <p>SP stated that the carry chair project results had been satisfactory and the identified chair had been put forward for operational trials.</p>	KK

		<b>Action</b>
	<p>The Chairman raised a concern that the report raised more questions than it actually answered in some areas.</p> <p>BS suggested that a year on year trend should be included and that the 'OTHER' category needed to be minimised.</p> <p>SP pointed out that the RIDDOR year on year analysis of general data was not ideal and was being replaced. The new system would need to be presented at a future Board Development meeting.</p> <p><b>Action:</b>  <b>KK to schedule Kevin Wynn to present new RIDDOR process as soon as possible.</b>  <b>(Action subsequently amended with Chairman agreeing that provision of a briefing paper would be sufficient)</b></p> <p><b>Approval:</b>  <b>The Trust Board accepted the contents of the annual Health and Safety Report 2011-12 subject to the minor changes listed.</b></p> <ul style="list-style-type: none"> <li>• Report needs to be numbered</li> <li>• Background/context - 2.1 - should read 2012 not 2013</li> <li>• Employee related incidents/near miss for 2011 – 12, Page 11, Paragraph 3 – wording to be improved.</li> </ul>	<p>KK</p>
<p><b>7</b></p> <p>7.1</p>	<p><b>STRATEGY, PLANNING AND POLICY</b></p> <p><b>For Approval: Foundation Trust Constitution</b>  <b>For Assurance: Letter from Trust Solicitors' Confirming Legality of The Constitution</b></p> <p>KK stated that the purpose of the paper was to seek approval of the Trust Board for the Foundation Trust Constitution. The Board was also requested to note legal advice to the Trust confirming the legality of the Constitution</p> <p>BS stated that there needed to be version control on the document.</p> <p><b>Action:</b>  <b>KK to add version control to documentation</b></p> <p>It was suggested that the Council of Governors (COG) and YAS Board should undertake a yearly review. This would be led by the Board through a sub-committee of Executive Directors and Non-Executive Directors (NEDs) taking account of comments on the log.</p> <p><b>Approval:</b>  <b>The Trust Board approved the Foundation Trust Constitution and noted the Solicitor's confirmation of the legality of the Constitution.</b></p>	<p>KK</p>

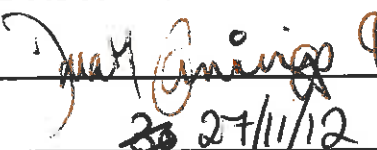
		<b>Action</b>
7.2	<p><b>For Approval: Foundation Trust Governance Rationale</b>            KK stated that the purpose of the paper was to seek approval of the Foundation Trust Governance Rationale which was a supporting document to the Foundation Trust Constitution.</p> <p>The Chairman confirmed to the Board that Staff and Member Governor Events had been organised and were due to commence at the beginning of October.</p> <p><b>Approval:</b>  <b>The Board approved the Foundation Trust Governance Rationale</b></p>	
7.3	<p><b>For Approval: Foundation Trust Membership Strategy</b>            KK stated that the purpose of the paper was to seek approval of the Foundation Trust Membership Strategy which was a supporting document to the Foundation Trust Constitution.</p> <p>RH pointed out that section 3.2, point 3.2.2 mentioned that the Trust had four constituencies based on the four areas that it served: North, South, East and West but Appendix five still listed the four constituencies as being North, South, East and West "Yorkshire".</p> <p><b>Action:</b>  <b>Amend Appendix 5 to read "North, East, South and West"</b></p> <p>EM asked whether the translated documents mentioned in Section 11, 'Communicating with our Members': Point 11.5 would be freely available or only on request.</p> <p>PD added that using a language translator service could be costly and wording could also be difficult at times.</p> <p>The Chairman added that fundamentally across the Government documents should be in English.</p> <p>Amendment to be made to Section 12 – 'Playing a key Community Role', point 12.5 should read: "We will ensure our presence in our local communities ....."</p> <p><b>Action:</b>  <b>KK to amend and re-circulate document</b></p> <p><b>Approval:</b>  <b>Subject to the amendments highlighted, the Board approved the Foundation Trust Membership Strategy.</b></p>	<p>KK</p> <p>KK</p>
7.4	<p><b>For Approval: NHS Staff Survey 2012 – additional questions.</b>            SM stated that the purpose of the paper was to seek formal approval from the Board to add local questions to the 2012 NHS Staff Survey questionnaire for the Yorkshire Ambulance Service NHS Trust.</p>	



		Action
	<p>The Chairman asked why the Board could not have had the questions earlier.</p> <p><b>Action:</b> <b>SM to feedback to Chairman</b></p> <p>SP asked what the Trust could influence in the 'Health and Wellbeing' section.</p> <p>A discussion took place around communications and how the Trust could look at policies and procedures.</p> <p>PD suggested that the organisation could drill down into the localities' meetings, commenting that internal communications for front line staff could sometimes be quite difficult.</p> <p>BS asked if everyone was aware of the Organisational Vision and Values for the Trust. The Board confirmed that this was the case.</p> <p><b>Approval:</b> <b>The Board formally approved the inclusion of the additional local questions in the 2012 NHS Staff Survey.</b></p>	SM
7.5	<p><b>For Approval: Register of Interests</b></p> <p>RB stated that the purpose of the paper was to inform the Board of the details held on the corporate Register of Interests.</p> <p>RB confirmed that the report was an accurate reflection and further confirmed that all leavers had been contacted and verified.</p> <p>The Chairman stated that Keeley Townend's entry needed to be challenged as shareholding had to be a major shareholding of over 5%.</p> <p><b>Action:</b> <b>RB to check Keeley Townend entry</b></p> <p><b>Approval:</b> <b>The Board accepted the record at Appendix 1 as a true representation of the interests declared for the financial year 2011/2012 subject to the Keeley Townend entry being checked.</b></p>	RB
7.6	<p><b>For Approval: Code of Conduct for each of: the Board of Directors and Council of Governors.</b></p> <p>KK stated that the purpose of this paper was to seek approval of the Foundation Trust (FT) Draft Codes of Conduct for the Board of Directors and Council of Governors.</p> <p>The Chairman pointed out that the document was based on a national document that had been adapted for YAS.</p>	

		<b>Action</b>
	<p>A discussion followed on the contents of the draft Codes of Conduct and the following amendments were noted.</p> <p><b>Section 7, Conflict of interest - Point 14 – to read “staff governors – If I am a staff-side representative or a member of ……….”</b></p> <p><b>Appendix 1, Definition of a Serious Breach - Section D to read “non- attendance at three consecutive meetings or persistent non-attendance without good reason and/or tendering of apologies. The Chairman will be the arbiter in such circumstances.”</b></p> <p><b>Definition of a Less Serious Breach - Remove section C</b></p> <p><b>Approval:</b>  <b>The Board approved the Codes of Conduct for the Board of Directors and Council of Governors subject to the amendments highlighted.</b></p>	
<b>8</b>	<b>PERFORMANCE MONITORING</b>	
<b>8.1</b>	<p><b>Board Review and Feedback - VERBAL</b>  The Chairman confirmed that a 360 degree Board Development programme was being looked into and requested comments on the meeting from the rest of the Board.</p> <p>PBW stated his belief that using different locations for meeting was giving the Trust much better opportunities to engage with the public.</p> <p>PD asked if there had been any progression on organising a Board Away Day similar to that which had taken place the previous year.</p> <p><b>Action:</b>  <b>AA to circulate Board Development Plan to Board members following Chairman’s approval.</b></p>	<b>AA</b>
<b>9</b>	<b>REGULATORY REPORTS</b> None	
<b>10</b>	<p><b>Date and Location of Next Meeting</b>  25 September 2012 at the National Coal Mining Museum, Overton, Wakefield, WF4 4RH  The meeting closed at 11.45am</p>	

**CERTIFIED AS A TRUE RECORD OF PROCEEDINGS**

  
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CHAIRMAN  
20 27/11/12 DATE