



Trust Board Meeting held in Public

Venue: The Spa Bridlington, South Marine Drive, Bridlington, YO15 3JH

Date: Tuesday 26 November 2013

Time: 0945 hours

Chairman: Della Cannings

Present:

Board Members:

Della Cannings	(DC) Chairman
David Whiting	(DW) Chief Executive
Dr Elaine Bond	(EB) Non-Executive Director
Erfana Mahmood	(EM) Non-Executive Director
Barrie Senior	(BS) Non-Executive Director
Rod Barnes	(RB) Executive Director of Finance and Performance
Ian Brandwood	(IB) Executive Director of People and Engagement
Michael Fox Davies	(MFD) Interim 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 & Non-Executive Director
Mary Wareing	(MW) Non-Executive Director

In Attendance:

Anne Allen	(AA) Director of Corporate Affairs & Trust Secretary
John Nutton	(JN) Non-Executive Director (Designate)
Cllr A Hodgson	(AC) Public Member
Jean Turner	(JT) Public Member
John-Joseph Cooper	(JC) YAS Paramedic
Jon Ellis	(JE) Ferno (UK) Limited

Minutes produced by: (MG) Mel Gatecliff, Board Support Officer

The meeting was preceded by a presentation, between 0900 and 0930, which was open to all members of the public. 'Putting patients at the centre of care: Our approach to providing high quality patient care' was jointly presented by Dr Julian Mark, Executive Medical Director and Steve Page, Executive Director of Standards and Compliance and was very well received by those present.

		Action
The meeting commenced at 0945 hours.		

		Action
1	<p>Questions from the Public</p> <p>The Chairman welcomed everyone to the Trust Board Meeting held in Public. She passed on her thanks to SP and JM for a useful and informative pre-meeting presentation.</p> <p>The Chairman invited questions asking people to identify themselves by name, geographical area and organisation if appropriate.</p> <p>JC, a YAS Paramedic, expressed concern about the on-going workforce changes. He stated that many of his colleagues in East Yorkshire were particularly concerned about the potential movement of staff as a result of the introduction of new rotas and asked whether there was any truth to the rumours circulating about a possible reduction in ambulance numbers.</p> <p>DW replied that the changes, which included the introduction of new rotas, more flexible rest breaks, changes to operational service cover arrangements, etc were very important. The fundamental reason for them was the current mismatch between demand and available resources, particularly at weekends and during evenings.</p> <p>DW stated that front line A&E staff numbers would be increased by 60 as the Trust recognised that a key element of the new arrangements was the amount of relief staff available to the organisation. By increasing this, YAS could improve its level of resource and also increase the amount of training time for staff. He confirmed that the new rotas would include some movement of people, probably 30-40 staff across the whole organisation.</p> <p>DW acknowledged the importance of the rota in people's lives and the importance of getting it right. The new rotas would not only provide stability in delivery of performance but also less shift overruns and more reliable rest break allocations. The changes were needed as extra people were required in the more rural areas particularly, as well as weekends and evenings in general.</p> <p>JC asked whether plans were in place to allocate additional staff over the summer months when the population of the East coast, from Hornsea to Scarborough, tripled in numbers.</p> <p>DW replied that the current rotas meant there was little flexibility across the organisation and relief levels were quite low unless the Trust used private providers and overtime, a costly exercise which was not the best use of public money. The introduction of the new rotas would allow the flexibility to release some extra hours into the system, which would improve, although not fully cure the problem.</p> <p>The Chairman stated that the move towards a more mobile health service would be a change in mind set for everyone. The service would no longer rely on how many people were based in a particular building but on the ability to flex and move people appropriately according to the needs and demands of patients across the region.</p>	

		Action
	<p>The Chairman stated that the changes were important to everyone and queried whether enough discussions were taking place with staff on a face-to-face basis.</p> <p>JC stated his opinion that YAS' staff would appreciate more face-to-face communication to allay their fears.</p> <p>MFD replied that the consultation period was currently under way and managers were happy to talk to people at any time until mid-January when the new rotas were rolled out.</p> <p>IB stated that if a manager was not available, HR business partners could be made available to visit staff to address their concerns, as the Trust was trying to encourage everyone's input to the consultation proposals.</p> <p>The Chairman acknowledged that misinformation could be very disconcerting, adding that distortion of facts often happened unwittingly. She thanked JC for his input.</p> <p>As there were no further questions, the Chairman thanked those present for the interest they had shown in YAS' work.</p> <p>The Chairman stated that members of the public were welcome to stay and observe the business of the Board meeting but should feel free to leave early if they wished as they had not committed to stay for the whole event. She reminded those present that, once the formal Board meeting started, they would be unable to play an active part unless they were invited to pass comment.</p> <p>The Chairman further stated that, although it might sometimes look as if the Board was not discussing important issues in enough depth, this was not the case, as a lot of work was carried out in the background prior to matters coming to the Board.</p>	
2	<p>Apologies / Declaration of Interests</p> <p>The Chairman formally welcomed everyone to the meeting.</p> <p>Apologies were noted as above and declarations of interest would be considered during the course of the meeting.</p> <p>The Chairman reported that MW had been in touch. The twins were doing well and starting to put weight on and although they remained her main priority, MW had confirmed that she would return to Board business shortly.</p> <p>The Chairman welcomed JN to his first Trust Board Meeting in Public. She stated that he had been appointed as a Non-Executive Director (NED) Designate to ensure that when the Trust moved to Foundation Trust status, YAS would have sufficient NEDs in place.</p>	

JN thanked the Chairman for her welcoming comments, adding that, having attended several Committee meetings in the past couple of weeks, he believed that he had already been inducted into YAS' Committee structure.

The Chairman confirmed that, although JN did not currently have a vote on the Board, she had never known any decision go to a vote in the 3½ years that she had been Chairman.

She further stated that Public Board meetings had been moved around to different external venues to encourage public attendance. However, there had never been a huge attendance at meetings so although meetings would continue to move around for now, the cost of time, mileage and facilities would be kept under careful review.

It was the Chairman's recommendation therefore that the venues for future meetings should be booked along the M1 and/or A1 spine to try to encourage a larger public attendance.

3

Minutes of the Meeting held on 24 September 2013 including Matters Arising (not on the agenda) and Action Log

The Minutes of the Meeting held on 24 September 2013 were approved as a true and fair representation of the meeting subject to the amendments highlighted.

Matters Arising:

Page 4, top action – RB not SP action.

Page 14, paragraph 2 – 'Red 8 demand' to be replaced with 'Red demand'.

Page 22, paragraph 2 – venue of meeting was Leeds not London.

Action Log:

DW guided the meeting through the updated Action Log.

In relation to the completed action PB-233 AA requested that the date of '10/11/2013' in section 'c' be amended to '10/12/2013'.

PB-161 – BS confirmed that Internal Audit's assurance re the IPR was currently strong. DW agreed that the IPR was much improved in terms of accuracy, etc. With the assurance that the IPR remained an item of scrutiny for the Audit Committee the action was closed.

PB-200 – DW confirmed that this was part of 2014/15 commissioning discussions on which RB and his team were leading.

RB confirmed that the item had been flagged as a priority at the first 2014/15 planning meeting the previous week. The item was also an agenda item at Yorkshire Air Ambulance meetings.

	Action
<p>JM stated that he continued to work with representatives from the armed forces in addition to considering other alternatives.</p> <p>It was agreed the action should be closed on the proviso that DW kept the Board updated on future progress.</p> <p>PB-215 – EB confirmed the wording had been changed. Action closed.</p> <p>PB-222 – Action remains open with completion date extended to Jan 2014. DW stated that the focus was now on overall completion. The Chairman stated that it was good to see some progress.</p> <p>PB-230 – The Chairman confirmed that her 360 degree process was completed and thanked everyone for their feedback. The TDA would now take over to carry out the new in-year review of the Chairman's performance, etc.</p> <p>PB-232 – RB confirmed that the IPR, through the Transformation Programme, was expanding the process to show reasons, etc which would be seen in the following month's IPR. Action closed.</p> <p>PB-241 – SP stated there were no significant concerns with compliance rate currently over 80% and the new Safeguarding Level 2 workbook due to be issued in 2-3 weeks. DW confirmed that Safeguarding and Statutory and Mandatory workbook completion were monitored at TEG. Action closed.</p> <p>PB-242 – Ambulance handovers - DW confirmed he had met with the poorest performing acute trusts and had been reassured by the approach and commitment being shown.</p> <p>EM stated her belief that the fear of receiving fines might be making people take breaches more seriously.</p> <p>DW confirmed that improvements were still needed in relation to post-handover wrap up times, etc so work was under way with crews to support this. Action remains open.</p>	
<p>4</p> <p>Chairman's Report</p> <p>The Chairman stated that the intention of her report was to provide information not available elsewhere so she would avoid the issues outlined in the Chief Executive's report.</p> <p>The Chairman further stated that, after operating with the new Clinical Commissioning Groups (CCGs) for just over 6 months, the NHS was undertaking a review. She asked whether YAS had considered undertaking a similar exercise to gather learning to help improve relationships.</p> <p>DW agreed that this seemed a sensible thing to do as it had been an interesting and challenging period of time.</p>	

	Action
<p>It would be good therefore to consider how the various parties could share their learning to improve how they worked.</p> <p>EB agreed it would be useful to go back over the learning of the past six months.</p> <p>Action: DW to consider the possible format of a short review of the first six months of working with the new CCGs, etc</p> <p>The Chairman stated that the Foundation Trust (FT) journey was a continuing frustration as ambulance services seemed to have been put to the back of the queue alongside mental health and community services, although the process still needed further clarification.</p> <p>She further stated that it seemed unacceptable not to have a form of shadow Council of Governors (COG) in place as members were currently being held in abeyance. The Chairman recommended the creation of a YAS Forum.</p> <p>As the Forum would not have the full powers of a COG its actual responsibilities would need to be clarified and it was the Chairman's belief that the Trust should immediately commence working through these details. It was hoped that the election process would start in early 2014.</p> <p>The Board agreed that YAS would benefit from developing and improving its work with Members to help shape its business plan.</p> <p>The Chairman stated that, currently, her major concern related to the Trust's performance as it was not fully delivering its core business. There was a lot of variation as some days the Trust did very well and other days it was failing its patients because of timeliness issues, etc.</p> <p>She acknowledged that there was a financial envelope within which the Trust had to work but the organisation also needed to deliver on performance.</p> <p>The Chairman stated it would have been wrong of her to ignore the issue, as YAS needed to be upfront about the challenges it faced.</p> <p>The Chairman stated that the new rotas, etc were an organisational necessity which would align resources to demand more effectively and she did not want to see any slippage of the delivery date of January 2014.</p> <p>The Chairman further stated that she continued to be disappointed by the misinformation in media releases, etc issued by the trade union, recently derecognised by YAS. The union only had a very small membership in YAS but this did not come across in the press, which was very unhelpful.</p>	<p>DW</p>

		Action
	<p>The workforce changes were for a good purpose and would lead to the delivery of an even better service to patients, who were at the centre of everything that the organisation did. It was not about pandering to a small minority of people in the organisation.</p> <p>The Chairman expressed her hope that the CCGs, etc were preparing effectively for the forthcoming bank holidays and winter period. It was her belief that YAS should be there for true emergencies and not for general medical care, as the 111 service needed to be able to signpost to services which were available.</p> <p>As there were no questions the Chairman thanked everyone for listening to her update report.</p>	
5	QUALITY, SAFETY AND PATIENT EXPERIENCE	
5.1	<p>Patient Story</p> <p>The Chairman stated that patient care was at the heart of the Trust's work. A patient story was provided at every Public Board meeting to highlight the work of the Trust and to learn about steps being taken to further improve its services and the knowledge of its staff.</p> <p>She stated that it was important for the Board to hear about patients' or their relatives' views on both good and bad experiences to give them something to reflect on. Although it took time to develop these stories, it was a good investment of time, as they were used to help to drive changes through the organisation.</p> <p>The Chairman read out that day's story which went back to February 2011 and a traffic collision on black ice when a car, being driven by a mother with her teenage daughter in the passenger seat, skidded and careered into the path of an oncoming lorry.</p> <p>Upon arrival at the incident, the YAS ambulance clinicians quickly established that the daughter had sustained fatal injuries and that the mother had sustained multiple serious injuries. YAS clinicians working on Yorkshire Air Ambulance (YAA) also arrived on scene, helping to stabilise the mother's condition and airlift her to hospital.</p> <p>Recovery was slow and took several months in hospital but the mother physically recovered and returned to work. She had contacted YAS to find out more about what happened at the scene of the incident as she had no memory of the events. She particularly wanted to understand about her daughter's condition and care, specifically if her daughter had died instantly in the crash.</p> <p>The patient record showed that the daughter had died in the crash so the YAS Quality Co-ordinator contacted the mother to let her know. She was grateful to receive the information and sent an email to YAS thanking the crew for their care and asking about the possibility of meeting the clinicians involved in both her and her daughter's care.</p>	

	Action
<p>Three of the clinicians who attended the incident were contacted and offered to meet with the mother to help with the grieving process.</p> <p>Learning points from the experience were:</p> <ul style="list-style-type: none"> • The inspiration and value of sharing positive feedback with YAS' clinicians; • The value of being open with patients and relatives to assist in the grieving and/or recovery process. <p>She further stated that it had been good of the lady to contact YAS and nice that someone appreciated what YAS' staff had done, even in such a sad situation.</p> <p>The story also proved to be a reminder that an incident did not stop once a patient had been delivered to hospital, etc and that YAS' staff deal with past events as well as current circumstances which should never be forgotten.</p> <p>The Chairman stated that YAA had opened its new base at Nostell Priory the previous week and importantly, it had been recognised in its press releases that the Paramedics were YAS' staff.</p> <p>The Chairman thanked everybody for listening.</p>	
<p>5.2</p> <p>For Approval:</p> <ul style="list-style-type: none"> • NHS Trust Development Authority Compliance with Monitor Licence Requirements for NHS Trust Return; • NHS Trust Development Authority Board Statements <p>The Chairman requested an update on the production of the evidence to support the returns, previously requested by BS.</p> <p>DW stated that an initial draft of the evidence had been circulated with that day's papers and further details would be provided to the Audit Committee at its meeting on 10 December. It was DW's intention to amend and submit the evidence with each return.</p> <p>DW reported that there had been no material changes to the returns for October which reflected the September return.</p> <p>SP stressed the importance of understanding the depth of evidence underneath the top line that was included in the spreadsheet. He added that there was an audit of evidence backing this up which could be provided if necessary.</p> <p>BS stated that it had been helpful to read through the evidence prior to formal consideration by the Audit Committee.</p> <p>Approval:</p> <p>The Trust Board approved the submission of the NHS Trust Development Authority Compliance with Monitor Licence Requirements for NHS Trusts Return and the NHS Trust Development Authority Board Statements for October 2013.</p>	

		Action
5.3	<p>For Assurance: Service Transformation Programme Board Report</p> <p>SP provided an update on developments, issues and risks in relation to the Service Transformation Programme.</p> <p>The Chairman stated that, although she had read the document, she still did not have a sense of what transformation wins had been achieved and asked whether the programme had achieved its ambitions to date.</p> <p>SP replied that, broadly speaking, the programme was delivering its aims and objectives with all projects more or less progressing in the right direction.</p> <p>The Chairman stressed that the Board needed more information about investment and achievements to date.</p> <p>JN stated that, as a newcomer to the Board, he would particularly welcome this information.</p> <p>SP agreed to include evidence about investment and achievements to date in the next report.</p> <p>Action: SP to included evidence of investment and achievements to date in next Service Transformation Programme Board report</p> <p>SP confirmed that the first Service Improvements Skills' course, to help build skills for the future, was currently running with 20 people from different directorates participating.</p> <p>He stated that the Bright Ideas scheme had received and reviewed over 130 ideas from across the whole organisation. Many of these were being taken forward for implementation and regular articles were published in Operational Update to update staff on these ideas.</p> <p>The Chairman asked where she and the NEDs would be able to see evidence of ideas submitted to the scheme, as the Board needed sight of all the ideas being suggested to ensure that the organisation was not overlooking any potentially good suggestions.</p> <p>SP replied that a detailed record was kept of all suggestions, including who submitted them, decisions taken, etc.</p> <p>EB stated that the Quality Committee had requested a detailed report for its next meeting.</p> <p>SP stated that it had been a challenge to administer and manage the scheme. Some good ideas would be difficult to implement at the current time so a secondary review at executive level had been set up to enable active support.</p>	SP

	Action
<p>In addition, responses were being sent to all individuals who had submitted an idea to provide recognition of their contribution to developments, etc.</p> <p>SP confirmed that progress had been made against the milestones in the version of the dashboard that had been circulated, adding that the version in the Integrated Performance Report (IPR) contained the most up-to-date information.</p> <p>He stated that, following a very ambitious programme during the first year of full operation, planning had started for 2014/15 and beyond. Senior managers were currently identifying priorities which would feed into the annual business planning process, following which the Trust should have a better idea of priorities.</p> <p>It was SP's belief that the focus of the programme for 2014/15 should be 'business as usual' with a small number of genuine transformation projects running through the programme.</p> <p>EB stated that she would like to see more information about the amber dashboard queries in the next report. She would also like to see greater detail in the report about Service Line Management (SLM) including recognition of the fact that it impacted on and underpinned some of the other transformation projects.</p> <p>SP agreed that it would be useful to pull out information about the inter-relationships in the programme, etc.</p> <p>Action: SP to include information about the programme's inter-relationships, including SLM, in the next report.</p> <p>Approval: The Trust Board noted the developments, issues and risks as outlined in the paper and was assured with regard to the Transformation Programme management arrangements and action.</p>	<p>SP</p>
<p>5.4 For Approval: Register of Declaration of Interests – Updated AA sought approval of the updated Register of Trust Board Members' Declarations of Interest for the Financial Year 2013/14.</p> <p>She stated that the Register was reviewed by the Audit Committee on behalf of the Trust Board with an annual formal Board review. The next review was not due until March 2014 but as there had been some amendments and the next Audit Committee meeting was not until mid-December, the amendments to the Register were presented in the interests of openness and transparency.</p> <p>The Chairman stated that a further amendment was required as the Register currently showed MFD as holding an elected position in BP which was not true. This item would therefore need to be deleted.</p>	

	Action
<p>Action: AA to delete MFD entry relating to elected position in BP.</p> <p>AA stated that the information relating to former Directors of the Trust had been moved to the end of the Register to make it easier to read.</p> <p>EB stated that her new directorship was with DEVA Designs Ltd, a fairly small gift wrap and stationery company. There was no conflict of interests, as it was in line with her other commercial contracts.</p> <p>The Chairman thanked AA for her update.</p> <p>Approval: The Trust Board approved the updated Register of Trust Board Members' Declarations of Interest for the Financial Year 2013/14.</p>	<p>AA</p>
<p>5.5 For Assurance: Board Assurance Framework including Corporate Risk Register</p> <p>SP presented an update to provide assurance that the Board Assurance Framework (BAF) for 2013/14 had been updated following peer review and to validate that the Audit Committee supported the progress toward achievement of the objectives.</p> <p>He confirmed that good progress had been made in migrating risk registers into the Datix system and work was continuing to validate and align all risk register entries.</p> <p>SP further stated that the Quarter 2 BAF had been presented during the latest round of Trust high level Committee meetings following closure of Quarter 2 data collection and the updated BAF could be seen from page 4 of the document.</p> <p>The key change in terms of presentation following the Audit Committee discussion was table one on page 7, which now included a high level information narrative about key risks since the last period, which was the best page to look at in terms of progress, etc.</p> <p>SP further stated that the pages from 21 onwards were being developed into a more comprehensive risk report to complement the BAF but were currently still work in progress. The Datix reports triangulated different sources of information on risks which related both to incident reports and other sources of risk information, some of which was still being compiled.</p> <p>Appendix 2 contained top level information from the individual risk registers, all of which had now been migrated onto the Datix system.</p> <p>SP stated that the next Risk Assurance Group (RAG) meeting was due to discuss Appendix 2 and work through all of the relevant risk registers. Appendix 2 would therefore be fully validated after the completion of the exercise.</p>	

The Chairman stated that Non-Executive Directors (NEDs) would struggle to use the hyperlink to the Datix risk register mentioned in 3.2, as they did not have access to YAS' systems.

SP stated that it would be useful if the NEDs could be provided with access to the intranet, as it was more secure than emailing.

The Chairman stated that she would discuss this with AA outside the meeting as it would be useful for the NEDs to access the intranet, even if it was only within YAS HQ.

Action:

AA to meet with Chairman to discuss NED access to YAS Intranet

AA

SP stated that a more detailed report about the Datix system and the risks within it was due to be considered by the Quality Committee and fed back to the Board as part of the Committee's next update report.

EM stated that the reason for two of the Hillsborough risks being noted as high risk on page 26 was because of the constant heavy workload and the detail involved in preparing for the new Inquests rather than because of any specific issues.

EB stated that the narrative on page 7 was very helpful and answered many of the questions that she had raised about a lack or perceived lack of movement.

She noted that a lot of actions in the BAF were due for completion in October and asked whether that work had been completed, seeking further assurance that the work due for completion at the end of Quarter 4 was on track.

SP replied that, having worked through all of the October deadlines, he was satisfied that they had been met although the updates had not been included in the current report which related to Quarter 2.

The actions due for completion at the end of Quarter 4 had been back-loaded to year-end, as they were large, complex strategic risks which were not easily resolvable. It was therefore still expected that several actions would need to be finalised and closed off at year-end.

However, all actions had been discussed with individual Executives and within the Trust Executive Group (TEG). They were generally accepted as being on track and it was hoped that the new narrative would help the Board to see this.

In relation to the three Serious Incidents on page 23 which related to falls, EB noted that guidance was being updated to cover patients refusing to be secured in a vehicle and asked why this had not previously been picked up during the normal course of staff training.

		Action
	<p>JM acknowledged this was a fair challenge as the Trust had recently seen a small cluster of patients falling from stretchers and carry chairs when in YAS' care. However, these were very small numbers and current guidance was being reviewed both in A&E and PTS.</p> <p>SP stated that the Trust's Investigations and Compliance Manager had completed a review, the outcomes of which would be picked up with the Associate Director of Organisational Effectiveness and Education to be included in training going forward.</p> <p>EB stated that some of the financial risks in Appendix 2 had been difficult to assign, for example to Operations, Finance, etc. Efforts would be made to streamline these risks at the next Finance & Investment Committee meeting, the outcome of which would be taken to the March Audit Committee meeting.</p> <p>SP stated his belief that the Trust would have a far stronger product in relation to risk management than it had ever had historically.</p> <p>The Chairman stated that all of the PTS risks were shown under the Operations directorate.</p> <p>SP replied that this was from where they originally came, adding that the entry would be corrected to reflect the Finance and Performance directorate.</p> <p>Action: SP to move ownership of PTS risks to Finance and Performance directorate.</p> <p>The Chairman asked DW which of the BAF risks he was most concerned about.</p> <p>DW replied that those relating to finance and performance were of most concern.</p> <p>Approval: The Trust Board noted the key risks outlined in the report and was assured with regard to the risk management process and actions.</p>	SP
6	STRATEGY, PLANNING AND POLICY	
6.1	<p>For Approval: Risk Management and Assurance Strategy - Updated</p> <p>SP presented the updated Risk Management Strategy for its annual review and approval following its previous review in Audit Committee and before that Senior Management Group (SMG).</p> <p>SP stated that, although the majority of the document's content was unchanged from the previous version, significant changes had been made to its formatting to shorten and streamline the core document.</p>	

	Action
<p>Key changes following the SMG and Audit Committee reviews were:</p> <ul style="list-style-type: none"> • Clarification of the Board's role in relation to defining risk appetite; • The alignment of the Quality Impact Assessment (QIA) process with wider risk management; • More information about the role of Internal Audit. <p>SP added that the risk and assurance information flows diagram in Appendix 5 had been developed through extensive Executive and Non-Executive Director discussion which had focussed on strengthening the flow of risk information through the organisation.</p> <p>The Chairman stated that the publication "Combined Code on Corporate Governance" referred to at the top of page 15, was out of date and asked which document it should be referred to.</p> <p>AA replied that it should be: "UK Corporate Governance Code 2012".</p> <p>Action: SP to replace "Combined Code on Corporate Governance" on page 15 with "UK Corporate Governance Code 2012".</p> <p>BS stated that he had already pointed out to SP that the version control was not up to date.</p> <p>Approval: The Trust Board agreed the content and approved the revised Risk Management and Assurance Strategy document as reflective of current Risk Management Systems of Yorkshire Ambulance Service.</p>	<p>SP</p>
<p>6.2 For Approval: Lease Vehicles for Executive Directors RB provided an outline of the proposed amendments to the Lease Car Policy for Executive Directors.</p> <p>DW stated that the current approval process for the Executive Directors' vehicles allowed the Executive Director of Finance & Performance to approve both his and the Chief Executive's car.</p> <p>It was agreed that, as the Trust needed to be rigorous in applying appropriate levels of approval, it was more appropriate for the Chief Executive to approve the Executive Directors' vehicles and the Chairman to approve the Chief Executive's vehicle.</p> <p>Action: Wording to be amended to clarify approval process for Executive Directors' vehicles.</p> <p>The Chairman stated that the financial level at which vehicles could be leased had been the same since 2006 and asked whether there was any market testing that this was an appropriate amount.</p>	<p>RB</p>

	Action
<p>DW stated that any potential reduction of allowance could cause problems as it was part of the current remuneration package and would affect the future recruitment of Executives, etc.</p> <p>RB stated that although the paper gave examples of the types of vehicles from within the allowance that could be leased no compare and contrast had been undertaken.</p>	
<p>Action: Market testing of current leasing levels for Executive Directors' vehicles to be carried out.</p> <p>The Chairman stated her belief that, although the figures seemed to be acceptable, leasing had become cheaper in recent years, so the Trust needed to be robust and assess comparative leasing figures.</p> <p>The Chairman reminded the Board of the negative press coverage that NWAS had received about the company vehicles they were leasing. However, she was not particularly concerned about YAS' situation because the Executives had not leased unsuitable vehicles.</p> <p>The Chairman stated that an incorrect title had been used in section 1.4 on page 4 of the Policy. YAS had a 'Remuneration and Terms of Service Committee' (RTSC) rather than a 'Remuneration and Terms of Reference Committee' so this would need to be amended.</p>	RB
<p>Action: RB to amend wording in section 1.4 to state: 'Remuneration and Terms of Service Committee'.</p> <p>JN asked whether a blanket contract was in place and whether a value for money check of all applications for leasing was carried out.</p> <p>RB replied that there were a number of different contracts in place for the NHS and confirmed value for money checks were carried out.</p> <p>JN stated that he understood the need for excess mileage charges in 3.9.9 but wondered why a refund would be paid for underutilisation.</p> <p>RB replied that he would double check the reason for this and would ensure that the wording was made more explicit.</p>	RB
<p>Action: Wording in 3.3.9 to be clarified to ensure meaning was more explicit re refunds for underutilisation of vehicles.</p> <p>RB stated that the wording relating to cost alternatives was to be made tighter in section 3.2.9 and the second full stop removed.</p>	RB
<p>Action: Wording in 3.2.9 to be tightened and second full stop to be removed.</p>	RB

		Action
	<p>The Chairman thanked RB for his update.</p> <p>Approval: Subject to the amendments above the Trust Board approved the amendments to the Executive Lease Car Policy as detailed in the above paper.</p>	
7	PERFORMANCE MONITORING	
7.1	<p>Chief Executive's Report and Integrated Performance Report DW presented his report to give assurance on the activity of the Trust Executive Group (TEG) from 17 September to 25 November 2013 and highlight the key variances / movements contained in the September and October 2013 Integrated Performance Reports (IPR).</p> <p>The Chairman stated that the Executive Directors should remember that the IPR was on the website and available to the public and avoid using acronyms, a practice which still needed to improve.</p> <p>DW stated he would presume that Board colleagues had read the report and asked colleagues to keep updates as brief as possible.</p> <p>He reported that, following a consultation period, the Urgent and Emergency Care Review's Phase 1 end of engagement report had been issued by NHS England. The co-author of the report, a key document for ambulance services, had been Prof Keith Willets.</p> <p>The Chairman asked whether the Phase 1 report had been shared with the Non-Executive Directors (NEDs).</p> <p>DW replied that he would ensure that they received a copy.</p> <p>Action: DW to provide Chairman and NEDs with a copy of Urgent & Emergency Care Review Phase 1 report.</p> <p>DW further stated that the Phase 2 report was due to be published in Spring 2014, to allow for development time for any proposed changes to the commissioning plans for 2015/16.</p> <p>The four key headlines from the review were;</p> <ul style="list-style-type: none"> • Provision of better support for self-care, in turn reducing avoidable attendances / admissions to hospitals; • Helping people to receive the right urgent care advice to enable them to make rational choices about care they needed; • Provision of more responsive out of hospital services, including the development of 999 ambulance services to become mobile urgent care treatment services; • Reconfiguration of A&E services, including two levels of emergency departments: Major Emergency Centres (MECs) to treat the most serious cases; and Emergency Centres (ECs) capable of assessing and treating patients, with the facility to transfer serious cases to the MECs. 	DW

	Action
<p>The Chairman stated that, as many people seemed to be unaware of the report's the existence it might be useful to compile a briefing sheet for Phase 1 pointing out how YAS could help to try to influence negotiations with the Clinical Commissioning Groups (CCGs).</p> <p>Action: DW/SP to liaise re production of YAS Briefing Sheet re Urgent & Emergency Care Review Phase 1 report.</p> <p>DW stated that a main priority going forward would be to maintain effective and responsive frontline services as the Trust headed towards the peak winter period.</p> <p>Performance was not fully where the Trust wanted it to be and the underperformance on Red 2 was hugely frustrating. This was partly accounted for by evening and weekend gaps in rotas that had previously been covered by the use of private providers.</p> <p>DW stated that the Red Performance plan had received a great deal of scrutiny at Trust Executive Group (TEG) where it had been agreed that some of the key elements would need to be brought forward.</p> <p>A range of mitigations were in place to support YAS' core services of A&E, 111 and PTS although when 111 demand picked up this exacerbated the pressures on the 999 service.</p> <p>DW stated that the organisation was currently in a similar position to the previous year but with less vacancies and better plans. However, with key mitigations in place the year's targets should be achievable.</p> <p>He further stated that YAS currently stood 2nd in the national league table for Red 1; 4th in that for Red 2, with several trusts unlikely to meet their annual target; and 1st in that for Red 19. The Trust needed to go into January 2014 at 75% or better, the maintenance of which would be a constant challenge through December.</p> <p>DW stated that, although the forecast surplus remained at £2.6m, no allowance had been made for the additional requirements of c£290k identified by the 111 management team to support the contingency plans over the festive/winter period.</p> <p>A discussion took place about the need for additional winter funding, particularly for the 111 service. The Chairman expressed the view that a letter should be sent to the Secretary of State for Health relaying the Trust's concerns about the current situation going into the winter, particularly in relation to patient safety if additional winter monies were not made available for 111 and 999.</p> <p>The Chairman expressed frustration that the winter challenge came every year but the Trust never seemed to learn from previous years. It was her belief that preparations should currently be under way for winter 2015 rather than winter 2014.</p>	<p>DW/SP</p>

	Action
<p>Action: A letter to be drafted for sending to the Secretary of State for Health in relation to additional winter funding, particularly in relation to the 111 service.</p> <p>DW stated he had been on a clinical 'ride out' with Paramedic ambulance crews in Sheffield and Leeds. He had received a warm welcome and had been very impressed by the care and compassion shown by the crews.</p> <p>MFD provided a short update about the on-going A&E redesign work, the outcome of which would allow the Trust to make better use of its current resources to fill gaps and improve patient care.</p> <p>He confirmed that a Clinical Leadership dashboard was now in place and would measure the effectiveness of clinical leadership and supervision in the Trust. The dashboard would be further refined over forthcoming months as the approach was fully embedded.</p> <p>There had also been increased focus on the recruitment of Clinical First Responders (CFR) across the region, with the plan to roll out 27 additional schemes by the end of March 2014.</p> <p>The Board formally congratulated Jan Matulewicz, a Clinical Advisor in the Wakefield EOC, who had received a national Clinician of the Year award. Jan had been nominated not just for his care and approach at work but for his wider community work, developing a direct clinical advice service and working directly to educate Care Home staff.</p> <p>JM stated his team had worked hard on the new British Association for Immediate Care Scheme (BASICS) governance document for YAS which had been accepted as the model national policy and was awaiting ratification by the National Ambulance Service Medical Directors (NASMeD) and national BASICS.</p> <p>Similarly, YAS' Resuscitation Policy, which incorporated Recognition of Life Extinct (ROLE) and Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) policies, had been accepted as the national ambulance services' resuscitation policy to be launched shortly.</p> <p>JM stated that YAS was looking to expand its research base having completed participation in its first drug trial. He added that the Care Quality Commission's (CQC) minor concerns from the inspection earlier in the year had been addressed when the revised Controlled Drug Standard Operating Procedure (SOP) and drug management protocol was launched in December.</p> <p>SP confirmed that the new Hillsborough inquests were due to start on 1 April 2014 and would last for around 9 months. Following the third pre-inquest review in October 2013, there had been a significant increase in preparatory activity.</p>	<p>DW</p>

	Action
<p>Police interviews had started, with current and former staff being interviewed as witnesses but there was currently no funding forthcoming from the Commissioners.</p> <p>SP confirmed that the final report from the CQC inspection visit in July 2013 had been received and actions agreed to address the two minor concern areas identified.</p> <p>In addition, the feedback from the NHS Trust Development Authority (TDA) Quality Visit on 6 September 2013 had also been received. Overall the feedback was positive, with a small number of issues relating to staff communication, engagement and support highlighted for further consideration by the Trust.</p> <p>SP confirmed that a meeting of the Trust Clinical Quality Forum, the aim of which was to engage with clinical staff and to encourage input from external agencies, had been held. The meeting had focussed on two key issues relevant to the recommendations from the Francis Report: patient safety and patient experience. The discussion highlighted issues relating to communication, attitude and behaviour and a range of opportunities to address patient concerns and support staff in delivering an excellent patient experience were considered.</p> <p>SP provided a detailed update in relation to the recent failures of the 111 Adastra system and the actions taken to overcome the ensuing problems.</p> <p>The Chairman asked whether there were any alternative suppliers.</p> <p>SP replied that although Adastra had been the only viable system available when 111 had gone live, there were now a couple more solutions on the market.</p> <p>EB stated her belief that consequential losses and penalties would need further investigation. SP confirmed that this would be done if there was any repetition of the issues.</p> <p>EM raised the issue of data protection risks arising out of the manual processing of forms, etc and it was agreed that SP would provide EM with further information outside the meeting.</p>	
<p>Action: SP to meet with EM to discuss actions taken to overcome possible data protection risks.</p> <p>JM stated ProcessFlows were currently working on site to try to correct the system problems but he was doubtful of a long term solution. He was also working on a paper looking at possible solutions such as outsourcing the verification process.</p>	<p>SP</p>

IB confirmed that YAS' Head of Human Resources (HR), Graeme Jackson, had tendered his resignation to take up the post of Director of HR for the Falkland Islands Council. Following an assessment centre held on 14 November, Kate Sims, the current Head of HR at Chesterfield Hospital NHS Foundation Trust had been appointed as his replacement.

He stated that the HR Directorate continued to work closely with Operations to progress the A&E Redesign programme. The difficult negotiations were progressing constructively and although a lot of time had been spent replying to correspondence from Unite the Union, the Trust was optimistic that final agreement would be reached with the Unison for full implementation during January 2014.

IB further stated that sickness absence levels continued to be a concern although there had been a significant improvement on the same period the previous year, which might have been, at least in part, due to the suspension of unsocial hour's payments when a staff member was absent due to sickness.

However, following representations by trade unions at national level, the Agenda for Change agreement had now been suspended pending national negotiations with trade unions.

IB stressed that the suspension of the national agreement did have the potential to undermine the improvement in attendance. However, work continued on the development of a more robust absence policy which it was anticipated would be implemented in January 2014 although no formal response had been received from Unison to date.

The Chairman expressed her disappointment as she could not understand why people should expect to receive unsocial hours' payments if they were off sick.

Cllr Hodgson asked whether a letter about the current derecognised union situation in the East Riding of Yorkshire Council press would be helpful.

The Chairman thanked Cllr Hodgson for his very welcome offer.

In relation to the completion of Performance Development Reviews (PDRs), IB confirmed that the Trust continued to make good progress with 73.57% of staff now having a current PDR. RB stated that the ICT and Business Information teams had begun to scope out the requirements for the development of a trust-wide data warehouse. The ICT and Resilience teams had held open sessions in the Gold Command Centre to demonstrate the new ResWeb application.

The Chairman asked whether ResWeb was a potential income generator.

RB confirmed that it was, as the tool had been developed with a potential to share with NHS and other emergency service partners. He added that several other organisations had already expressed an interest in purchasing licenses for its use.

RB further stated that the Business Development and Finance teams had begun planning work for 2014/15 to agree annual plan objectives and budget priorities and contracts should be ready for sign off by the Board at the end of March.

He stated that, following the earlier Board approval of the Hazardous Area Response Team (HART) internal works tender, the Estates team had begun work with colleagues in Resilience and external contractors to finalise timescales, room layouts and equipment specifications. A site visit had been carried out by the HART team.

In addition, formal consultation had begun on the new structure for the Patient Transport Service (PTS) planning and control function.

The Chairman stated her belief that the whole process was taking so long that contracts would be lost if YAS did not improve quickly.

RB replied that there had been a slight improvement in South whilst acknowledging that although every effort was being made to speed up the pace of the change, it was currently not quick enough. Overheads needed to be reduced by, for example, using more voluntary car drivers who were half the cost of taxis.

EM expressed concern at the £1.2m overspend and the fact that the service was currently £427k behind plan, adding that she struggled with an overall understanding of the financial aspects of PTS.

RB stated that the most significant aspects were not delivering the Cost Improvement Programme (CIP) in the current year including the use of private providers, although this would curtail off when the new rotas were introduced.

He further stated that the deeper the Trust dug into PTS, the more opportunities it identified for potential savings.

EM asked whether these potential changes and improvements would incur costs, as the organisation had already invested heavily in PTS.

RB replied that, in order to give YAS a competitive advantage, for example creating easy to use booking systems, there would be some cost. Another possible cost was the planned recruitment of more volunteer car drivers and an extension of the mileage rate above the current 10,000 mile limit.

EB needed assurance that the budget was sustainable. RB replied that the Trust would need to sustain the current dips in expenditure and deliver performance at the same time.

DW stated that an effective PTS planning function was the key to success. The organisation needed to get a better grip of local planning with an element of central oversight.

RB stated that progress continued in relation to the improved frequency of medical device maintenance. There had been significant in month improvements as a result of internal staffing resources being supported by external resources, pending development of a partnering relationship with Mid Yorkshire Hospital Trust Medical Devices Team, although he would prefer to retain the in-house team.

RB further stated that although the forecast surplus remained at £2.6m, the contingency reserve had been reduced by an increase in benefit compensation payments of £346k in month leaving contingency reserves of £1m.

The Chairman requested an update on where the Trust was at risk in relation to injury benefit compensation payments, etc. It was agreed that RB and SP should liaise in relation to the compilation of information for an update report.

Action:

RB and SP to liaise in relation to compilation of information for an update report on injury benefit compensation payments.

SP/RB

The Chairman stated that the over-trading in North Yorkshire was currently skewing YAS' business. It was her belief that the 72% target contract needed to better reflect actual trade ie the Commissioners needed to pay for 75% performance.

RB confirmed that the cost of service provision in North Yorkshire was £370.80 per head as opposed to £160.70 for some urban areas and YAS was currently paid the standard average tariff.

The Chairman stated that although she was confident that the Trust would achieve its joint 75% red performance target for the year, it was a critical time of year because if anything went wrong over the winter months there was little time left to turn things around.

Her main concern related to the patients who weren't reached within the performance target time and the psychological pressure on YAS' staff when the target was missed and she stressed the need for some marked improvements in this area.

Approval:


Having noted and discussed the variances contained within the September and October 2013 IPR reports, highlighted in the Executive Directors reports, the Trust Board agreed that it had sufficient assurance on the activities of the Executive Team and Trust Executive Group during this period,

		Action
	<p>Prior to the lunch break the Chairman summarised the contents of the agenda for that day's Private Board meeting in case members of the public were unable to attend the remainder of the Public meeting.</p> <p>The meeting broke at 1230 hours, reconvening at 1300 hours.</p>	
7.2	<p>Charitable Funds Committee – Committee Chairman's Report of the last meeting held on 22 October 2013 and Minutes of the meeting held on 1 August 2013</p> <p>EM presented a report to give assurance that the Charitable Funds Committee was meeting the requirements set down in its terms of reference.</p> <p>JN asked whether gift aid was being claimed on some of the donations. RB confirmed that it was.</p> <p>The Chairman stated that it was clear that things were starting to move and develop and thanked EM for her report.</p> <p>Approval: The Trust Board noted and 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>	
7.3	<p>Audit Committee – Committee Chairman's Report of the last meeting held on 17 October 2013 and Minutes of the meeting held on 16 July 2013</p> <p>BS updated the Trust Board regarding the activities of the Audit Committee.</p> <p>It was noted that although the July minutes were still marked as 'draft' these were the Committee approved version of the minutes.</p> <p>BS confirmed that the Audit Committee's work with the other Level 2 Committees was going very well.</p> <p>The Chairman thanked BS for his update.</p> <p>Approval: The Trust Board noted and was assured by the discussions within the Audit Committee and the key issues highlighted for further scrutiny within the Committee's work programme.</p>	
7.4	<p>Quality Committee – Committee Chairman's Report of the last meeting held on 12 November 2013 and Minutes of the meeting held on 10 September 2013</p> <p>In PD's absence, SP updated the Board on the activities of the Quality Committee. A highlight of the meeting had been the presentation of a paper by JM outlining exploratory analysis of a potential mortality indicator for ambulance Trusts, work being led by YAS on behalf of the national ambulance medical directors.</p>	

		Action
	<p>The Chairman thanked SP for his update.</p> <p>Approval: The Trust Board noted and was assured by the discussions within the Quality Committee and the key issues highlighted for further scrutiny within the Committee's work programme.</p>	
7.5	<p>Finance & Investment Committee – Committee Chairman's Report of the last meeting held on 12 November 2013 and Minutes of the meeting held on 10 September 2013</p> <p>EB updated the Trust Board regarding the activities of the Finance & Investment Committee. She stated that the additional joint F&I and Quality Committee meeting had been valuable, as it had helped both meetings to flow smoothly.</p> <p>JN stated that there seemed to be many opportunities to increase income, for example Private and Events in item 8.1, on page 11 of the minutes and asked how much income was likely to be raised.</p> <p>RB replied that the expectation was that income would be increased by £200k-£300k on the previous year. He further stated that new contracts, etc were brought to F&IC as a standing agenda item.</p> <p>The Chairman thanked EB for her thorough report.</p> <p>Approval: The Trust Board noted and 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> <p>The Chairman asked the Level 2 Committee chairmen to ensure going forward that a standard wording was used for the recommendations forthcoming from each of the Committees.</p> <p>Action: AA to ensure that standard wording was used for the report recommendations from each of the Level 2 Committees at future meetings.</p>	AA
7.6	<p>Board Review and Feedback: Board Vital Guiding Principles</p> <p>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 requested feedback on the meeting and asked whether the Board believed it had achieved its guiding principles, stating her belief that the IPR and Committee reports had, in her opinion, not received enough consideration that day.</p>	

		Action
	<p>She reminded the Executive Directors that papers circulated in advance should be taken as read.</p> <p>RB stated that, in terms of the timing of Committee meetings, the schedule for 2014/15 was much improved as it had been challenging to turn documentation around between meetings during 2013/14.</p> <p>AA agreed that there had been a significant improvement in terms of phasing and the length of time between meetings in 2014/15.</p> <p>SP stated that the streamlining of papers between Board and the Committees would be worth revisiting periodically to ensure that there was no duplication.</p> <p>AA replied that she had been tasked with a piece of work to help streamline meetings which she would bring back to the Trust Executive Group (TEG) for wider discussion in due course.</p> <p>DW suggested that the current quality and detail of Board and Committee minutes might help in terms of shortening reports, etc.</p>	
8	<p>Regulatory Reports There were no Regulatory Reports.</p> <p>It was resolved that the remaining business to be transacted was 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 be excluded from the remaining part of the meeting.</p> <p>The Chairman thanked everyone for attending. The meeting closed at 1340 hours.</p>	
9	<p>Dates and Locations of Next Meetings: 28 January 2014 in the Chadwick Lawrence Suite, The John Smith's Stadium, Stadium Way, Huddersfield, HD1 6PG.</p>	

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS


 _____ CHAIRMAN
 28/1/14 _____ DATE