



Board of Directors Meeting held in Public

Venue: Trust HQ, Springhill 2, Brindley Way, Wakefield, WF2 0XQ

Date: Thursday, 29 November 2018

Time: 0930 hours

Chairman: Kathryn Lavery

Board Members:

Kathryn Lavery	(KL)	Chairman
Rod Barnes	(RB)	Chief Executive
Mark Bradley	(MB)	Executive Director of Finance
Christine Brereton	(CB)	Director of Workforce and Organisational Development
Tim Gilpin	(TG)	Non-Executive Director
Richard Keighley	(RK)	Non-Executive Director
Dr Julian Mark	(JM)	Executive Medical Director
Leaf Mobbs	(LM)	Director of Urgent Care and Integration
John Nutton	(JN)	Non-Executive Director
Steve Page	(SP)	Executive Director of Quality, Governance and Performance Assurance/Deputy Chief Executive
Nick Smith	(NS)	Executive Director of Operations

Apologies:

Anne Allen	(AA)	Trust Secretary
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In Attendance:

Phil Storr	(PS)	Associate Non-Executive Director, YAS
Matt Sandford	(MS)	Associate Director of Business Development, YAS (for Item 2.1)
Jock Crawford	(JC)	Freedom to Speak Up Guardian, YAS (for Item 4.3)
David Bolam	(DB)	Public Member
Karen Griffiths	(KG)	Ferno UK

Minutes produced by:

Joanne Lancaster	(JL)	Committee Services Manager
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1	Opening Business	
	The meeting commenced at 0940 hours.	

	Action
<p>1.1 Apologies / Declaration of Interests Apologies were noted as above and declarations of interest would be considered during the course of the meeting.</p> <p>The meeting was preceded by a presentation updating the Board on YAS' Research and Development work by Jane Shewan, Head of Research and Development and Fiona Bell, Research and Development Manager.</p> <p>Jane outlined the various research studies and developmental work being undertaken by the team and the future aspirations of the Trust in this regard. It was noted the Trust was gaining a positive reputation for the research work it was undertaking.</p> <p>The Chairman thanked Jane and Fiona for their presentation and for their work in showcasing the research being undertaken by the Trust.</p> <p>The Chairman welcomed NS, Executive Director of Operations to the Trust.</p> <p>The Chairman explained that due to a short term contract PS had with NHS England he would no longer be a Non-Executive Director of the Trust but would attend the Board meetings as an Associate Non-Executive Director.</p>	
<p>1.2 Minutes of the Meeting held on 30 August 2018 including Matters Arising (not on the agenda) and Action Log The Minutes of the Board Meeting in Public held on 30 August 2018 were approved as a true and fair representation of the meeting.</p> <p>Matters Arising JM informed the Board that further to Item 6.1 of the Minutes of 30 August 2018 – Responsible Medical Officer Annual Report 2017/18 - he had successfully completed medical revalidation.</p> <p>Action Log: Action PB-477 – Winter Communications shared with Partners – YAS had shared winter delivery plans with A&E Delivery Boards across the region. Action Closed.</p> <p>It was noted that all other actions on the action log had been appropriately closed.</p>	
<p>2.0 Strategy Development</p>	
<p>2.1 For Assurance: Corporate Strategy Update (including NHS Long Term Plan) RB introduced the item and advised that a significant amount of work had taken place on the Corporate and Enabling Strategies over the last few months.</p> <p>The Corporate Strategy had been developed against a background of significant growth in the 999 emergency service and NHS 111 demand and sought to place patient care into the heart of communities.</p> <p>National Drivers for the Corporate Strategy included the NHS Five Year Forward Plan and the Carter Report which both advocated collaborative</p>	

working such as the Northern Ambulance Alliance (NAA) of which YAS was a member.

The Corporate Strategy had considered population health factors and access to services particularly in relation to Integrated Care Systems and Place Based planning.

There was also an emphasis on engaging with the Trust's staff within the Strategy and the Strategy itself had been developed in consultation with YAS' workforce. A series of 'Listening Events' had been held to understand what staff believed YAS' priorities should be and how to address the Trust's challenges. These successful events had been welcomed by staff and feedback generated had been invaluable for the Trust.

RB emphasised the Trust's commitment to working collaboratively with partners.

The four strategic objectives were noted and key measures were outlined for each objective:

- Patients and communities experience fully joined-up care responsive to their needs;
- Our People feel empowered, valued and engaged to perform at their best;
- We achieve excellence in everything we do;
- We use resources wisely to invest in and sustain services.

MS outlined the priorities within the Strategy:

- Deliver the best possible response for each patient, first time;
- Attract, develop and retain a highly skilled, engaged and diverse workforce;
- Equip our people with the best tools, technology, and environment to support excellent outcomes;
- Embed an ethos of continuous improvement and innovation, that has the voice of patients, communities and our people at its heart;
- Be a respected and influential system partner, nationally, regionally and at place;
- Create a safe and high performing organisation based on openness, ownership and accountability;
- Generate resources to support patient care and the delivery of our long-term plans, by being as efficient as we can be and maximising opportunities for new funding;
- Develop public and community engagement to promote YAS as a community partner; supporting education, employment and community safety.

MS outlined the timeline for the Corporate Strategy and explained this was a five year strategy; the ambitions would be delivered over the lifecycle of the Strategy. In the first year of the Strategy, for example, the Trust would be focused on delivering Ambulance Vehicle Preparation (AVP), electronic Patient Record (ePR) rollout, key workforce developments, rotational paramedic posts and Quality Improvement (QI) fellow development. This would be in addition to the major focus on the implementation of phase 1 of the Ambulance Response Programme (ARP).

It was hoped that by 2022/23 at the culmination of the Strategy, YAS would see a fully implemented Integrated and Urgent Emergency Care Service across the system, the Trust would have procured a new standard Computer Assisted Dispatch (CAD) across the Northern Ambulance Alliance (NAA) partners, YAS' approach to quality improvement would be fully embedded across the Trust and the Trust's plan for zero avoidable clinical harm would be realised.

MS advised that the Corporate Strategy would have a dedicated space on the Trust's website and this would be updated and populated as ambitions progressed. Alongside the Strategy would be videos from the Leadership events etc, to provide a narrative and wider context to staff.

RB added that he hoped this would provide a more consistent message for all staff across the Trust. The information would be built on to include 'you said, we did' in relation to staff surveys and feedback received through other means. He emphasised the importance of ensuring that the 'One Team, Best Care' message ran throughout the core of the Trust.

MS updated the Board on the national NHS Long Term Plan (NHS LTP) which had recently been published. He advised that the Trust plans aligned well against the Long Term Plan priorities. It was noted that there were different priorities from NHS England (NHSE) and NHS Improvement (NHSI) to those outlined in the NHS LTP. There was already correlation to the Trust's ambitions and for those areas not currently aligned plans would be developed accordingly.

MS provided an update on each the Trust's Transformation Programmes:

- Service Delivery and Integrated Workforce;
- Capacity and Capability;
- Place Based Care;
- Infrastructure.

Programme Boards were in place for each area and these were overseeing the work and progression for their respective area. A regular update was provided to the Trust Executive Group.

MS ended the item by providing a brief summary on the Planning Guidance for 2019/20 which was anticipated to be published in early December. It was expected that the Contract deadline would be 31 March 2019. The draft Operational Plan would need to be published by February and it would be an extremely tight turnaround from draft submission to final publication.

It would appear there would be a number of changes to how the Control Total would be calculated and to the tariff calculations.

The Chairman asked that should extraordinary meetings be required as much notice as possible was provided.

The Chairman thanked RB and MS for the informative update.

Approval:

The Board noted the update.

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<p>2.2 For Approval: People Strategy – Final Draft Plan The paper presented the final draft of the People Strategy for approval by the Board.</p> <p>Consultation had taken place with a number of stakeholders including staff side and feedback had been incorporated in to the final document where appropriate.</p> <p>CB explained that the draft version had been discussed by the Board at the meeting on 30 August 2018 and since that date there had been further development of the Key Performance Indicators (KPIs) and further alignment to the Corporate Strategy and other enabling strategies such as Freedom to Speak Up and Quality Improvement. Final feedback had been received prior to submission to the Board and would be incorporated into the final version, subject to Board approval:</p> <ul style="list-style-type: none"> • Strengthen reference to partnership working with the staff side; • Outline the governance framework within Human Resources and Organisational Development to support the delivery of the strategy; • Ensure language is consistent and supports the approach to integration across service lines; • Strengthen the role that the YAS Academy would play in both the Education and Learning aim and also in the overall delivery of the strategy; • Ensure that the performance indicators were in line with the Integrated Performance Report (IPR) and Key Performance Indicators (KPIs) and other workforce KPIs. <p>CB informed the Board that the Strategy would help inform and develop the Workforce Plan.</p> <p>RB stated that he believed this was a good robust strategy which aligned well with the Corporate Strategy.</p> <p>SP added that it was intended to launch the Quality Improvement Strategy and the Freedom to Speak Up Strategy at the same time as the People Strategy.</p> <p>The Chairman welcomed the People Strategy and thanked CB and team for their work on its development.</p> <p>Approval: The Board approved the People Strategy (subject to minor amendments as outlined at 3.7 of the report).</p>	
<p>3.0 Performance and Finance</p>	
<p>3.1 For Assurance: Chief Executive’s Mid-Year Review RB guided the Board through a presentation on the Mid-Year Review which was based on the Trust’s previous set of objectives:</p> <ul style="list-style-type: none"> • Safe and Sustainable: Provide a safe, effective, caring and sustainable service for all patients; • Best People: Attract, develop and retain a highly skilled, engaged and diverse workforce; 	

- **Care through Collaboration:** Provide the best possible integrated care, in collaboration with our system partners;
- **Achieving Excellence:** Transform our services to exceed national performance and quality measures.

It was noted that YAS had completed phase 1 of the national Paramedic Re-banding and phase 2 was well underway against timescales.

Frontline staffing had increased by 174 since April 2018. Although this was slightly behind target; plans were in place to mitigate this. The review of the Wakefield Emergency Operations Centre (EOC) had been postponed due to building work taking place at the York site.

The Trust continued to progress with its digital deployment and it was noted that the internally developed electronic Patient Record (ePR) had been rolled out in South and West Yorkshire and 45% of patient records were now completed electronically. Plans were in place for the roll-out to the rest of the YAS region. The Northern Ambulance Alliance (NAA) had commenced a joint tender for a Unified Communications System.

It was noted the Trust was currently bidding for the Integrated and Urgent Care contract and should the organisation be successful with its bid then there would be a different delivery model including increased clinical advice. The Trust had renewed its focus on the recruitment of clinical staff. The NAA had completed a feasibility study for a common Computer Assisted Dispatch (CAD) system.

The Trust continued to engage with and develop its staff. The Leadership in Action development programme had commenced which would see approximately 800 leaders from across YAS take part. The Pulse survey had received a good return although there was more the Trust could do to encourage staff to participate. The Trust had Diversity and Inclusion Strategy and a Workforce Race Equality Standard Plan in place. The Occupational Health contract had gone out for tender.

Community Engagement remained a focus for the Trust with initiatives such as the Q Volunteering scheme. Restart a Heart had had its most successful year with over 25,000 secondary age children being trained across the region. The organisation continued to collaborate with partners such as Acute Trusts and Nursing Homes on various initiatives to improve outcomes and experience for patients. The Critical Friends Network (CFN) had been re-established and the Trust was utilising their knowledge and expertise on a range of workstreams.

It was noted that the Trust had been successful with its bid to deliver non-emergency Patient Transport Services (PTS) in the North of the region. Work continued with Acute partners to develop pathways and standards such as Low Acuity Transport. The number of Acute and hospital service reconfigurations across YAS' region was noted as was the role the Trust had taken in engaging with partners and Commissioners to understand and mitigate performance, quality and patient impacts in this regard.

The Trust had remained focused in terms of delivering efficiencies through

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<p>innovative solutions. The Huddersfield and Leeds Ambulance Vehicle Preparation sites were due to be fully operational by the end of December. A new training facility had opened in Doncaster. Substantial savings had been made with the NAA on the Double Crewed Ambulance (DCA) contract.</p> <p>It was noted the Trust had been at the forefront of some national initiatives such as the Quality Improvement Fellows, early adopters of Freedom to Speak Up and the NAA which was a pathfinder in the ambulance sector. YAS' Fleet Services had been recognised again nationally for its work on low omissions vehicles.</p> <p>The Trust's performance against the national Ambulance Response Programme (ARP) standards for the first six months of 2018/19 had been above the national average with the exception of Category 1 calls. The Trust had since made improvements in Category 1 although it was recognised that there was more work to do against Categories 1 and 2 and plans were in place to deliver the ARP standards consistently across all 4 categories.</p> <p>Call handling performance within NHS 111 remained good with the Trust being one of the top services in the country in this regard. PTS continued to perform well against its key performance indicators. There had been some issues embedding the new North Yorkshire PTS contract, mainly relating to the application of the Commissioners' eligibility criteria for patients. The Trust was working in partnership with Commissioners to resolve issues.</p> <p>As at the end of October 2018 the Trust was forecasting that it would meet the planned surplus for 2018/19. The Trust had undertaken a number of mitigating actions to ensure its financial performance remained robust.</p> <p>RB emphasised that the organisation was in a positive position and had developed and implemented a number of initiatives and programmes on its journey to be an outstanding Trust.</p> <p>TG asked in terms of diversity and inclusion data whether the Trust liaised with Higher Education (HE) Institutions to ensure they were recruiting a mix of students including from under-represented groups.</p> <p>CB responded that the Trust had access to data relating to targets for HE recruitment on related courses however she was not aware that any data on success against those targets for HE institutions was available.</p>	
<p>Action: To explore with HE institutions data availability of the successful uptake of courses from under-represented groups against HE targets. To share the information with TG once established.</p> <p>RB added that the Universities regularly attended Trust community engagement events to encourage individuals from under-represented groups to consider becoming Paramedics for their future careers. He explained that YAS was promoting the different range of careers within the ambulance sector at employment fairs etc.</p> <p>The Chairman stated the Trust was currently looking at the diversity of the</p>	<p>CB</p>

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<p>Board.</p> <p>CB added the Trust was focused on diversity and inclusion across the organisation including attainment against the Trust's Workforce Race Equality Standard (WRES) Action Plan. It was acknowledged the Trust had work to do in this regard.</p> <p>It was noted that the Quality Committee would receive a presentation on Paramedic Higher Education Courses and take up and completion at their December meeting.</p> <p>In regards to community engagement TG asked whether the Trust considered empowering communities to look after their own health and involving the YAS Charity in this engagement.</p> <p>RB responded that a significant element of the draft Community Engagement Strategy was to work with communities on prevention. The Trust was already piloting Q-Volunteering within the community. Community Engagement was a focus for the Trust with the aspiration to deliver real benefits to patients and patient outcomes in the future by working with partners and the third sector.</p> <p>Approval: The Board noted the content of the presentation.</p>	
<p>3.2 For Assurance: Chief Executive's Report and Integrated Performance Report</p> <p>The report provided assurance on the activity of the Trust Executive Group (TEG) from 23 August 2018 to 21 November 2018 and the opportunity for TEG to highlight the key variances/movements contained within the October 2018 Integrated Performance Report (IPR).</p> <p>It was noted the previous three months had been a particularly busy period for the Trust and the Executive Team with a number of initiatives coming to fruition including:</p> <ul style="list-style-type: none"> • YAS' Corporate Strategy; • Enabling strategies; • Integrated and Urgent Care Tender (IUC); • Embedding plans for the Ambulance Response Programme (ARP); • Northern Ambulance Alliance (NAA) work focuses on the Lord Carter recommendations; <p>In addition to these key pieces of work the Executive Team had also been involved the following:</p> <ul style="list-style-type: none"> • Annual General Meeting; • Leadership Summit; • Long Service Awards; • Strategy development sessions; • BME national event hosted by YAS; • Leadership Academy. <p>RB passed his thanks on to TEG and those who supported the team for their continued commitment and support.</p>	

The significant amount of work that the bid team had undertaken on the Integrated Urgent Care (IUC) tender was noted; the team had worked hard to ensure the tender met national requirements and responded to the tight financial constraints set by Commissioners. It was believed the bid submitted allowed YAS to deliver a service aligned to the Trust's values. RB expressed his thanks to the bid team for their resilience and diligence.

In terms of the Trust's bid for the IUC contract it was noted that YAS was currently the provider of NHS 111 services for the region. The organisation was undertaking a number of initiatives relating to the IUC agenda including taking part in the Paramedic Rotation Pilot and the introduction of Hospital Ambulance Liaison Officer (HALO) roles within the Emergency Department at Acute Trusts.

It was noted that there had been significant improvement in Category 1 for both the mean and 90th centile standards. It was expected that performance would improve in the South of the region with the increase in fleet and staff numbers. YAS had put mitigations in place for the issues relating to the availability of driver training.

The Northern Ambulance Alliance (NAA) had met during the last two months to further enhance collaboration in response to Lord Carter's Report. Significant progress had been made in the areas of Fleet and ICT and work to explore sharing some back office functions was also progressing well.

The annual Restart a Heart Day had taken place on 16 October 2018 training secondary school children across the region in Cardiopulmonary Resuscitation (CPR). This annual event was delivered in partnership with the British Heart Foundation and had attracted some high profile attendees including the Lord Lieutenant of West Yorkshire. RB thanked everyone involved in the day and praised its continued success.

RB informed the Board that plans had been developed to strengthen the Community Engagement Team and ensure there was alignment to the Corporate Strategy and priorities and that of the wider community agenda with partners.

RB invited each of the Executive Directors to present an update.

Operations Directorate

NS informed the Board that he had attended four engagement events with staff in the past few weeks since he had started with the Trust. These had been well attended by staff and he had found them useful and informative.

Performance had improved particularly in relation to Category 1 although there were some challenges in the South of the region. Work was underway to understand the reasons for this and mitigate against them. Performance against Category 2 remained a challenge although it was anticipated this would improve with the additional resources recruited into the service.

Turnaround times continued to be a challenge and the Trust was working with those Acute Trusts which regularly had significant handover. This included the Hospital Ambulance Liaison Officer + (HALO+) role which had been

introduced into Emergency Departments (ED) and was the interface between the ED and YAS' staff.

It was noted the Board would receive an update at its Private Meeting later that day in relation to the Emergency Preparedness Resilience and Response.

The Chairman requested an update on current handover delays at Scarborough Hospital.

NS responded that the Trust was working with the hospital to evaluate the position and mitigate issues as much as possible.

JM commented that although the Trust was slightly outside of the standards for mean and 90th centile for the Ambulance Response Programme (ARP) Category 2 standard he emphasised that from a clinical perspective the service remained safe.

Urgent Care and Integration Directorate

It was noted that Patient Transport Services (PTS) in the South had experienced a significant increase in activity against the plan. Work was on-going with Commissioners to manage this pressure on the service.

Challenges remained for the 'on-day discharge' key performance indicator (KPI) with a further deterioration in performance in October. The Trust continued to work with Acute Trusts and Commissioners to deliver improvements in the on-day patient flow pathway.

The revised application of national eligibility criteria for PTS had been rolled out in the North of the region as part of the new contracts. The Trust was actively working with the Clinical Commissioning Groups to focus on patients with mobility needs. There were some discrepancies between CCGs relating to the application of criteria for different patient groups; the Trust understood from CCGs that work was underway to consider consistency.

It was noted that all PTS fleet had defibrillators on board and it was believed YAS was one of the first UK PTS fleets to deliver such an undertaking.

Within NHS 111 year to date performance had seen 91.1% of calls answered in 60 seconds or less against a national target of 95%. In terms of clinical call-back the service had achieved 82.8% within 2 hours against a national target of 95% and a local requirement of 82.5%.

The Trust had submitted a bid for the Integrated and Urgent Care tender and it was expected that the outcome would be announced before the festive period.

It was noted that recruitment had been a key focus for the service with over 100 new starters joining since July.

Clinical Directorate

JM referred to the World Road Cycling Championships which were due to take place in Yorkshire in September 2019 and stated that the Trust would need to consider the impact of such events on the organisation. It was

expected there would be upwards of two million extra people in the area. The Trust was partially funded for its role in this regard and did have a duty under the Civil Contingencies Act. The benefits that such world class events brought to the region were acknowledged.

The Carter Report had referred to job cycle time and the influence clinical decisions could have regarding on-scene time. A 10-10-10 campaign had been launched, initially concentrating on optimising the on-scene time in the management of patients with acute stroke, before considering other clinical presentations where timely conveyance to a place of definitive care might be beneficial to patient outcome.

A senior Midwifery Advisor who had been funded by the West Yorkshire Local Maternity System (LMS) had joined the Clinical Directorate for a year to review and develop YAS' policies and training in maternity.

It was noted that a new clinical refresher programme had commenced and good feedback had been received from attendees. The training included early recognition of shockable rhythms. It was expected that training would be utilised effectively and where uptake was not prevalent this would be addressed.

There had been some capacity issues relating to Health Care Records and as a result the Trust had not been able to submit full data sets. The issue had been reported to NHS England (NHSE) and a recovery plan agreed. An investigation had commenced and the findings of this would be used to ensure that the situation did not recur.

Quality, Governance and Performance Assurance

Work was progressing well to support the implementation of Quality Improvement (QI) across the Trust. A number of projects were underway incorporating quality, efficiency, patient and staff aspects. The Trust had been involved in the Project A national initiative and a number of ideas had been generated through this. The Trust would lead on a number of these including, staff wellbeing, falls and mental health.

The Trust had been successful in its application to join the NHS Improvement (NHSI) 'Leadership for improvement' Board Development programme which would take place during 2019. This would provide additional development to further strengthen the Board as a group.

To date there was no indication of when the Care Quality Commission (CQC) inspection would take place for YAS although it was anticipated it would be at some point between January and June 2019. The Trust continued to work to the CQC standards and prepare for the inspection. The Trust had recently reviewed the scope of its registration in the light of new guidance issued to ambulance trusts nationally. This now reflected the use of limited emergency surgical techniques by a small number of senior clinicians deployed by YAS.

Revised arrangements were now in place for oversight of the major transformation programmes within the Trust which supported delivery of the Trust Strategy. These operated via four Programme Boards with Executive leadership for each.

It was noted that Safeguarding Level 2 compliance had continued to rise over the last quarter following the introduction of the new combined Adult and Child level 2 e-learning product. A national review of updated inter-collegiate training guidance documents was on-going and the Trust was engaging with this alongside other ambulance trusts.

Requests relating to Freedom of Information (FOI) were currently significantly below the target level due to short-term capacity issues within the team. Mitigation arrangements were in place to expedite responses pending recruitment into current vacancies.

Workforce and Organisational Development

The National Staff Survey had been live from 24 September to 30 November 2018 and the current return rate was 32% which was lower than had been expected. Data received through the Staff Survey would help the Trust understand where improvements were required in the system. It was expected the full results from the Staff Survey would be presented to the Board Meeting in Public in March 2019.

Action:

To include the Staff Survey results on the agenda for the Board Meeting in Public 28 March 2019.

CB

CB explained that Performance Development Review (PDR) compliance appeared as if it had significantly dropped however this was due to the timing of data input and report production; the Trust was actually at 81% compliance against the target.

CB thanked the HR and Payroll teams for the work in fully implementing the NHS National Pay Award for 2018.

RB asked whether the Trust was in line with expectations for the uptake of the flu vaccination.

CB responded that the Trust currently stood at 60% uptake. YAS was one of the top three ambulance services in the country for uptake of the flu vaccination; work was ongoing to educate staff and breakdown barriers for the uptake of the flu vaccination.

Finance Directorate

A major focus for the Finance Team had been the 2019/20 Cost Improvement Programme (CIP) for the Trust. Ideas for CIPs had been generated over the summer and now work was underway to work with Directorates to identify which ideas could be worked up into full CIPs.

The new 'cloud-based' finance computer system would go live on 3 December.

It was noted that work continued to meet the fleet Ambulance Response Programme (ARP) demand profile of 380 Double Crewed Ambulances (DCAs) with 137 being brought into service during the current financial year 2018/19. The first 40 vehicles were now in frontline service.

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<p>The Procurement Team had 160 projects on the 2018/19 workplan. The team had delivered 91 of these to date with 55 ongoing. The team continued to work with the Northern Ambulance Alliance (NAA) on joint procurement schemes such as the Unified Communications System. The Trust had tendered for the Occupational Health Scheme and this was currently being evaluated.</p> <p>The ICT team had been working hard on the roll-out of the electronic-Patient Record.</p> <p>JN referred to the financial challenges of 2018/19 and 2019/20 although with due diligence he believed that the Trust could retain its robust financial position.</p> <p>Approval: The Board agreed it had sufficient assurance on the activities of the Executive Team and Trust Executive Group during the period and noted and discussed the variances contained within the October 2018 IPR report, highlighted in the Executive Directors' reports.</p>	
<p>3.3 For Assurance: Finance and Investment Committee (F&IC) – Minutes of the Meeting Held on 7 June 2018 and Chair's Report of the Last Meeting Held on 6 September 2018</p> <p>The minutes of the meeting of 7 June 2018 were noted.</p> <p>JN summarised the key points of the F&IC meeting in September which had included the revised capital plan, Business Cases for Double Crewed Ambulances, a Unified Communications system and financial performance at Month 4.</p> <p>The F&IC had noted slippage within the PTS and A&E budgets and the mitigating actions against these.</p> <p>Approval: The Board was assured by the discussions within the Finance and Investment Committee and the key issues highlighted for further scrutiny within the Committee's work programme.</p>	
<p>3.4 For Assurance: Audit Committee Chair's Verbal Update of the Meeting held on 10 July 2018</p> <p>RK advised that the Audit Committee continued to follow the workplan and apply appropriate scrutiny to key issues within the work programme.</p> <p>Approval: The Board was assured by the discussions within the Audit Committee and the key issues highlighted for further scrutiny within the Committee's work programme.</p>	
<p>3.5 For Assurance: Northern Ambulance Alliance (NAA) Update</p> <p>RB advised that the job advertisement was currently out for the Managing Director of the NAA and it was expected to appoint to that role in January 2019.</p>	

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<p>The most recent meeting of the NAA Board in September 2018 had focused on the following:</p> <ul style="list-style-type: none"> • The recommendations from the Lord Carter report; • The steps for the NAA to take to enable full membership of the East Midlands Ambulance Service (EMAS); • Updating the Terms of Reference to reflect EMAS becoming full members of the NAA. <p>It was noted that the rotation of the lead Chief Executive and Chairman of the NAA had been postponed to such a time that roles had been filled substantively within each of the ambulance services.</p> <p>The next meeting of the NAA was due to take place in February 2019.</p> <p>JN commented that he believed the NAA workstreams were beginning to gather momentum and he looked forward to seeing what could be achieved by the Alliance.</p> <p>Approval: The Board noted the update and gained assurance on the work of the Northern Ambulance Alliance.</p>	
<p>4 Quality Safety & Patient Experience</p>	
<p>4.1 Patient Story</p> <p>The Board heard the story of Mark who on 10 April had a temporary loss of consciousness and fell down the stairs at his home. Mark’s head hit the wall with such force that it created a hole in the wall leading to heavy bleeding and the way he landed resulted in his head being wedged under a small ledge. Mark’s wife phoned 999 for help and an ambulance attended the incident within 6 minutes after receiving the call.</p> <p>Due to the way Mark had landed the job was challenging for the crew, particularly as there was a need to immobilise him to prevent further injury. The crew called for back-up and spent approximately one hour moving heavy furniture and carefully extricating Mark from the bottom of the stairs. Mark was transferred to the Royal Preston Hospital where X-rays showed that Mark had broken his C2 vertebrae. Mark underwent an operation during which the surgeons fused his vertebrae back together and he spent almost 4 weeks recovering in hospital. Fortunately Mark recovered and incredibly suffered no paralysis and has since regained most of the movement in his neck and head.</p> <p>During his recovery Mark and his wife submitted a compliment to YAS and a request to meet the crew to thank them in person. The crew who attended the incident visited them at home and during this visit helped Mark walk down the stairs which he had avoided since his accident.</p> <p>Mark praised the team’s integrity and compassion during the incident and thanked them for empowering him to take his first walk down the stairs with their help.</p> <p>It was noted by the Board that a C-spine injury is not consistently recognised by all clinical staff and that failure to assess and identify this type of injury</p>	

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<p>correctly and ensure appropriate immobilisation could lead to further injury.</p> <p>Mark's story would be used during YAS' education programmes for C-spine assessment and immobilisation.</p> <p>Approval: The Board noted the Patient Story.</p>	
<p>4.2 For Approval: Emergency Preparedness, Resilience and Response (EPRR) Compliance</p> <p>The paper provided the current position in relation to the Annual NHS England EPRR Assurance Self-Assessment process.</p> <p>The paper had been discussed extensively at the Board Meeting in Private on 27 September and was on that day's agenda to be approved in a public setting.</p> <p>It was noted the Trust was substantially compliant in the EPRR Core Standards and fully compliant in the Deep Dive – Business Continuity. For areas of non-compliance the Trust had developed an action plan.</p> <p>JM had been undertaking the Accountable Emergency Officer role on a temporary basis and it was noted that now NS was in post this role would transfer to him with support from JM as required.</p> <p>Approval: The Board approved the EPRR Self-Assessment rating as substantially compliant for submission to NHS England.</p>	
<p>4.3 For Assurance: Freedom to Speak Up Report Six-Monthly Review</p> <p>The report provided an update on Freedom to Speak Up (FTSU) activity over the last 12 months.</p> <p>It was noted that the FTSU Guardian continued to promote the FTSU initiative across the Trust and was working to further embed the initiative as 'business as usual'. FTSU was represented on a number of working groups across the Trust.</p> <p>In June 2017 the national FTSU Guardian's office had launched a 12 month trial of its case review process. The trial reviewed the handling of concerns and the treatment of people who had spoken up, where there was evidence that good practice had not been followed. The case reviews published to date offered Trusts an excellent opportunity to benchmark their own policies and practice against the recommendations within the reports.</p> <p>JC referred to the independent report into the Gosport War Memorial Hospital NHS Trust. Whilst there were no specific issues within the recommendations for YAS to implement it was believed the Trust could take learning from the findings relating to concerns raised and whistleblowing allegations.</p> <p>It was noted that the Board had undertaken a FTSU Self-Assessment over the summer to ensure that the Board understood its duties with relation to this. The Trust believed FTSU initiative was well-developed although it was</p>	

	Action
<p>acknowledged there was further work to do to consistently embed the initiative across the Trust.</p> <p>The National FTSU Guardian, Dr Henrietta Hughes had visited the Trust in July 2018 when a national FTSU event had taken place at Trust HQ; the Trust had received positive feedback in this regard.</p> <p>The Chairman welcomed that the FTSU process was being used by staff and that people felt able to raise concerns in this way. She asked about the data relating to bullying and harassment and whether this was indicative of a wider issue (8 concerns raised for YAS which had an element of bullying and harassment during Q1 and Q2 2018/19)).</p> <p>RB responded that the Trust was investing in leadership development to ensure a consistent approach of managing staff. He provided assurance that policies had been implemented, or were in the process of being implemented, to aid with this.</p> <p>CB added that it was planned to triangulate information from formal allegations of bullying and harassment alongside disciplinary and capability data to better understand any underlying issues. The introduction of the People Strategy, FTSU Strategy and the Quality Improvement Strategy would help the Trust with a more consistent approach to staffing issues.</p> <p>Discussion took place in relation to the data relating to bullying and harassment and it was noted that there was no baseline for comparison. The Trust had launched the Behavioural Framework and alongside the aforementioned strategies these provided clear guidance and expectations for YAS employees.</p> <p>JC advised that he was reviewing the role of the FTSU Advocate to ensure that it was working effectively and to evaluate how the FTSU Guardian could further support it.</p> <p>The Chairman thanked JC for his work on the FTSU agenda.</p> <p>Approval: The Board noted the contents of the report.</p>	
<p>4.3 For Assurance: Quality Committee –Minutes of the Meeting Held on 7 June 2018 and Chairman’s Report of the Meeting held on 6 September 2018</p> <p>The minutes of the 7 June 2018 were noted.</p> <p>A brief summary of the items discussed at the last Quality Committee was provided which had included various workforce strategies and an item on Rotational Paramedics. The workplan for the Committee was being reviewed by SP and team to foster wider engagement with the organisation and staff.</p> <p>SP added that the format of the meeting and reports had been changed ahead of the September meeting to move to a more integrated approach. The review had proved useful to sense check the information the Committee received and refresh this with renewed focus.</p>	

	Action
<p>Approval: The Board was assured by the discussions within the Quality Committee and the key issues highlighted for further scrutiny within the Committee's work programme.</p>	
<p>5 Workforce</p>	
<p>5.1 For Assurance: National Paramedic Re-Banding Implementation Quarterly Update The paper provided assurance that progress was on track with the implementation of the national Paramedic Re-banding Agreement.</p> <p>CB advised that phase 1 had been successfully implemented and the Trust was on track to complete phase 2.</p> <p>MB commented that there was a financial risk relating to non-implementation of the agreement which should be noted.</p> <p>JM referred to the Paramedic Fast Track process and advised that the scheme had a strong governance process supporting it.</p> <p>CB advised that YAS had a strong presence nationally on this project with Claus Madsen, YAS 'Associate Director of Education and Learning being a member of the national team.</p> <p>Approval: The Board noted the update and gained assurance that progress was being made in relation to the national agreement for Paramedic re-banding to Band 6. The Board noted the wider implications of the Paramedic re-banding to Band 6.</p>	
<p>6.0 Risk Management and Internal Control</p>	
<p>6.1 For Assurance: Corporate Risk Register (CRR) and Board Assurance Framework (BAF) The paper presented the BAF for 2018/19 including changes to the Corporate Risk Register and highlighted specific risks, actions and mitigations.</p> <p>It was noted that the report had been through the regular assurance cycle prior to being presented to the Board.</p> <p>The Board noted the risks added to the Corporate Risk Register since the last Trust Board meeting and the following risks were of particular note:</p> <ul style="list-style-type: none"> • Risk 1084 – National Emergency Services mobile Communications Programme (ESMCP) – this was a national project and subject to the national timetable. There was a risk to YAS with the potential for vehicles to have Mobile Data Terminals (MDTs) that would be over 10 years old with no replacement alternative. YAS were monitoring the issues and had approved a capital bid to purchase further MDTs if required; • Risk 1128 – Avaya Telephony Platform – It was noted the procurement was underway to determine the future technology solution; • Risk 1163 – Emergency Operations Centre (EOC) Festive Rota Cover 	

	Action
<p>– It was noted the Trust had developed a targeted plan which had reduced the deficit hours to a manageable level;</p> <p>The Board noted the risks that had been reduced since the last Trust Board meeting and had been removed from the Corporate Risk Register. Of particular note:</p> <ul style="list-style-type: none"> • Risk 150 – Insecure storage of paper-based records on YAS sites – This risk had been managed down with continuous review of storage and the support of local and senior managers; • Risk 680 – Air conditioning and fire suppression in server rooms – Works had been completed to the Springhill site and this risk had now closed; • Risk 1088 – Leeds AVP faulty ventilation system – Works had been undertaken on some remedial work. Further work would be undertaken to further minimise exposure. This would be managed at a local level. <p>It was noted that Risk 945 – Implement Commander Framework remained on the Corporate Risk Register. An action plan had been developed to mitigate risks.</p> <p>The Trust had undertaken a thorough review of winter-specific risks with a risk register that reflected risks pertinent to the winter period. It was noted that the Trust Executive Group (TEG) received regular information relating to the winter period.</p> <p>Approval: The Board noted the update and the developments outlined in the report and gained assurance with regard to the effective management of risks across the Trust.</p>	
<p>6.2 For Assurance: Confirmation of NED roles including:</p> <ul style="list-style-type: none"> • Appointment of Senior Independent Director (SID); • Freedom to Speak to Non-Executive Director. <p>The Chairman asked the Board to approve TG as the Non-Executive Director for Freedom to Speak Up.</p> <p>The appointment of the Senior Independent Director required further consideration and would be deferred until the Board Meeting in Private February 2019 meeting.</p> <p>Action: The appointment of the Senior Independent Director to be deferred until the Board Meeting in Private Meeting February 2019 meeting.</p> <p>Approval: The Board approved the appointment of TG as the Non-Executive Director lead for Freedom to Speak Up. The Board agreed to defer the appointment of the Senior Independent Director role until March 2019.</p>	
<p>6.3 For Approval: Memorandum of Understanding – West Yorkshire and Harrogate Integrated Care System – Final Sign-Off</p>	

	Action
<p>The paper sought to obtain final sign-off of the Memorandum of Understanding – West Yorkshire and Harrogate Integrated Care System at a Board Meeting in Public by the Board of Yorkshire Ambulance Service NHS Trust.</p> <p>It was noted the paper had been discussed and approved at a YAS Board Meeting in Private on 30 August 2018. The item on that day’s agenda was to formalise this at a Board Meeting in Public setting.</p> <p>Approval: The Board approved the final sign-off of the Memorandum of Understanding – West Yorkshire and Harrogate Integrated Care System.</p>	
<p>7.0 Meeting as the Charitable Trustees</p>	
<p>7.1 For Assurance: Charitable Funds Committee (CFC) - Chair’s Report of the Meeting held on 17 August 2018</p> <p>TG explained he had taken over as the Chair of the Charitable Funds Committee from Ronnie Coutts, former Non-Executive Director, who had left the Trust in August 2018. TG had been fully briefed by Danielle Norman, Charitable Funds Manager on the meeting of 17 August 2018 as he had not been in attendance.</p> <p>The Committee had discussed a number of key issues including the recent re-branding of the charity, Community First Responders (CFRs), fundraising action plan and resource capacity.</p> <p>TG had met with Danielle Norman to discuss the vision of the charity and principles going forward including ensuring the future financial sustainability of the charity.</p> <p>RB referred to the recent event relating to volunteering at the Shine venue in Leeds. There had been positive discussions during the event including Community First Responder funds brought under the Charitable Funds umbrella. This would provide stronger governance and transparency of CFR funds whilst allowing the funds to benefit from gift aid on donations etc. Discussions would take place with CFRs over the coming months in this regard.</p> <p>Approval: The Board was assured by the discussions within the Charitable Funds Committee and the key issues highlighted for further scrutiny within the Committee’s work programme.</p>	
<p>7.2 Charitable Funds Annual Report</p> <p>The paper presented the independently examined 2017-18 Annual Report and Accounts of the Yorkshire Ambulance Service NHS Trust Charity for agreement and signature.</p> <p>It was noted that a full audit of the Accounts was not required for this year under section 144 (1) of the Charities Act 2011 and that an independent examination was required instead (as consistent with previous years).</p> <p>The Trust’s external auditors, Ernst & Young LLP undertook the examination</p>	

	Action
<p>during October 2018 and the examined Annual Report and Account for 2017-18 was attached to the report.</p> <p>The Board noted the key highlights of the Charitable Funds year:</p> <ul style="list-style-type: none"> • Locating 36 Community Access Defibrillators and 32 Automated Emergency Defibrillators in public places in partnership with local community groups; • Continuing to support a Community Outreach Trainer who had trained 3,285 people in emergency first aid; • Supporting Restart a Heart Day which had trained more than 25,000 school students in Cardiopulmonary Resuscitation (CPR). <p>It was noted that the Letter of Representation would be signed by TG as the Charitable Fund Chair and MB as the Executive Director of Finance following approval by the Trustee.</p> <p>Approval: The Board as the Charitable Fund Trustee approved the Charitable Fund's 2017-18 Annual Report and Accounts and the signature of these by TG and MB.</p>	
<p>7.2 For Assurance: Charitable Funds Quarterly Financial Update The paper provided an update on the YAS Charity's current financial position.</p> <p>As at 31 October the Charity had unrestricted cash reserves of £222k. To date the Charity had received an income of £53k and spent £46k; £21k of the income was designated.</p> <p>The Charity had received a £10k legacy which had increased funds for this year.</p> <p>The Chairman commented that she believed the Charity had moved forward a long way in the last 12 months and the Charitable Fund Manager had worked hard to progress the charity.</p> <p>Approval: The Board of Directors as YAS Charity Trustee noted the contents of the report and supported the actions proposed.</p>	
<p>8.0 Closing Business</p>	
<p>8.1 Key Points Arising from the Meeting The Chairman noted the key points from the meeting which had looked at the Corporate Strategy, People Strategy and the Mid-Year Review. An update on the Freedom to Speak Up initiative had been welcomed and useful.</p> <p>The Annual Report and Accounts for 2017/18 for YAS' Charity had been approved.</p>	
<p>8.2 Board Review and Feedback The Chairman thanked everyone for attending and contributing to the meeting. The meeting finished at 1240 hours.</p>	

		Action
	To be resolved that the remaining business to be transacted is of a confidential nature and 'that representatives of the press, and other members of the public, be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest', Section 1 (subsections 2 & 3), Public Bodies (Admission to Meetings) Act 1960.	
10.	Date and Location of the Next Meeting of the Trust Board Held in Public: Board of Directors Meeting in Public 28 March 2019 Pre-Board Presentation: 0900 – 0930 hours Board of Directors: 0930 onwards Trust HQ, Kirkstall & Fountains, Springhill 2, Brindley Way, Wakefield, WF2 0XQ	

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

_____ **CHAIRMAN**

_____ **DATE**