

Trust Board Meeting in Public
Venue: Videoconference



Date: Tuesday 27 April 2021
Time: 0930 – 1400 hrs

Board Members Present:

Kathryn Lavery	(KL)	Chairman
Tim Gilpin	(TG)	Non-Executive Director
Andrew Chang	(ACC)	Non-Executive Director
John Nutton	(JN)	Non-Executive Director
Jeremy Pease	(JP)	Non-Executive Director
Rod Barnes	(RB)	Chief Executive
Kathryn Vause	(KV)	Interim Executive Director of Finance
Dr Julian Mark	(JM)	Executive Medical Director
Nick Smith	(NS)	Executive Director of Operations
Steve Page	(SP)	Executive Director Quality, Governance and Performance Assurance
Phil Storr	(PS)	Associate Non-Executive Director
Mandy Wilcock	(MW)	Director of People and Organisational Development
Karen Owens	(KO)	Interim Director Urgent Care & Integration
Simon Marsh	(SM)	Chief Information Officer

In Attendance:

Juliana Field	(JF)	Head of Corporate Affairs
Helen Edwards	(HE)	Head of Communications and Community Engagement
Luzani Moyo	(LM)	Freedom to Speak Up Guardian
Tracy Anastasiou	(TA)	Administration Officer (observer)

Apologies:

Anne Cooper	(AC)	Non-Executive Director
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Minutes produced by:

Odette Colgrave	(OC)	Executive Coordinator
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The meeting commenced at 0932 hrs

Minute Ref:	
OPENING BUSINESS	
TB21/001	Apologies and Declaration of Interests: Apologies noted for this meeting for AC. Any declarations of interest would be considered during the course of the meeting.
TB21/002	Minutes of the Previous Meeting held on 28 January 2021 including Matters Arising (not on the agenda) and Action Log. The Minutes of the Meeting held on 28 January 2020 were approved as a true and fair representation of the meeting.

Minute Ref:	
TB21/003	<p>Matters Arising There were no matters arising.</p> <p>Action Log: All actions were complete.</p>
TB21/004	<p>Record of Urgent Decisions The Board received a paper outside of Board for Smartphones for an urgent decision.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Formally note the decision to approve the purchase of Smartphones.
TB21/005	<p>Record of Urgent Decisions The Board received a paper outside of Board for Stryker Stretchers for an urgent decision.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Formally note the decision to approve the purchase of Stryker Stretchers.
STRATEGY DEVELOPMENT & BUSINESS PLANNING	
TB21/006	No items for discussion presented at this meeting.
QUALITY, SAFETY & PATIENT EXPERIENCE	
TB21/007	<p>Patient Stories in Trust Board meetings Members received a presentation reflecting on the patient stories received by Board to date and the way they have provided learning for the Trust.</p> <p>Since 2017 the Board had received 16 stories. Patient stories reflect personal experiences of patients presented in their own words and help to highlight areas of good practice and areas for learning and improvement. These have included and resulted in promotion of NEWS, improved communication, changes to policies, supporting staff to identify ineffective breathing, effective allergy advice, caring response from CFR, and compassion to a family during the response to death by suicide.</p> <p>Moving forward the Trust would look to align the story from an individual patient to the wider strategy and include greater diversity of patients. It was noted that the video format supported patients to present in their own voice. A suggestion was made around the inclusion of stories and experience of staff as well as patients.</p> <p>The Board extended its thanks to the patients who had shared their stories.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the contents of the presentation.

Violence Reduction Standard

The Board received a paper providing an update on the new national violence prevention and reduction standard, development of the blue light 7 Point Plan and pilot programme for body ward video cameras.

Acts of violence and aggression presented a significant area of risk for the Trust, with various initiatives in place. However, it was acknowledged that there was more to do to support staff. The new violence reduction standard would be incorporated into NHS contract. The key area of development for the Trust was to complete a self-assessment and develop a strategy plan arising from the self-assessment. This would come back to a future Board meeting for approval.

The Trust had been working with the police and fire services to develop a 7-point plan across all blue light services. This sets out the support being provide and expectations from the organisation. A draft 7-point plan for victims of crime was appended to the report.

It was noted that the Trust was taking part of a national pilot programme for the use of body worn camera. A project group had been established and it was anticipated that the first station would 'go live' in May 2021. Policies, procedures, and training were in development to support staff and ensure clarity around use of the cameras.

Some concern had been raised and discussions held around patient confidentiality, noting that the cameras would not be recording unless activated in line with Trust policy. It was anticipated that the Trust may incur future cost pressures relating to licences and implementation. An evaluation of the pilot would be completed and considered by NHSE to consider the utilisation of cameras beyond the three-year pilot.

A discussion was held around how staff felt about the technology and opportunity to share their feedback. It was noted that staff had been surveyed ahead of the pilot with over 100 responses received. There had been varying views expressed, although mostly supportive of a pilot. It was noted that several key performance indicators would be developed to support the evaluation process.

Members discussed the use of body worn cameras within other services i.e., police, where they had been used for several years and the learning available. It was noted that there was limited evidence around the effectiveness, and it was anticipated that the Pilot would provide sufficient data to support effective evaluation. It was noted that any information would be shared with the Integrated Care System.

It was recognised that this was supportive of the crews, however there had also been an increase in the number of violence and aggression received by those in the contact centres. It was acknowledged that there was an awareness of this and that it would be considered as part of the programme of work to support staff.

Action

It was suggested that an update would be provided to the Board in October 2021.

Minute Ref:	<p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the new Violence Prevention and Reduction Standard and supports the proposals regarding the required self-assessment and strategy development. • Support the development of the blue light 7 Point Action Plan for victims of crime. • Note the current position regarding the BWV pilot and supports the implementation plan as outlined <p><i>LM joined the meeting.</i></p>
TB21/009	<p>Freedom to Speak Up</p> <p>The Board received a paper providing an update on the concerns reported during Q2, Q3 and Q4 2021, lessons learned and the Trust's response to recently published national developments and guidance.</p> <p>It was noted that there had been a difficult period for freedom to speak up (FTSU). The Trust had increased the communications to staff around the FTSU processes and there had been a reduction in reporting going into May 2021. It was believed that this could also be attributed to other methods available of reporting and raising concerns.</p> <p>Work was being progressed to address concerns raised relating to bullying and harassment, this included online incidents. A discussion was held around the Trusts zero tolerance approach to bullying and harassment, how staff could be supported and given confidence around raising concerns, improving visibility of FTSU advocates on stations, and encouraging staff to become advocates.</p> <p>It was noted that LM was working with the Head of Corporate Communications and Community Engagement in developing guidance for staff around the use of social media and the different platforms, and the One YAS platform.</p> <p>LM noted that he felt supported by the Board members and that there was an open-door policy for him to all members. It was noted that the role was part time which presented some constraints to balancing front line role with the guardian role. There had been discussions with other services around setting up a regional FTSU forum.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Receive assurance from the information provided and support the further developments outlined in the paper.
TB21/010	<p>Significant Events & Lessons Learned</p> <p>The Board received a paper to provide an overview on key events and learning that have taken place during the past six-months (October 2020 to March 2021).</p> <p>It was noted that there had been a slight increase in the number of incidents during this period. The main themes arising related to right care, right place and avoiding admissions to A&E. It was identified that there had been an increase in the number of patients reluctant to travel to hospital due to the pandemic. A new theme had arisen around newly qualified paramedics, with areas for learning around strengthening support arrangements, and working with university providers to</p>

Minute Ref:	<p>prepare students for paramedic roles. It was anticipated that the new team based working model would provide greater clinical support for newly quality paramedics.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the current position and take assurance from the work highlighted within the report, supporting the ongoing proposals for improvement.
WORKFORCE	
TB21/011	<p>Fit and Proper Person Policy</p> <p>The Board received a paper to request approval of the Fit and Proper Person policy.</p> <p>It was noted that the Remuneration Committee had considered the policy and were supportive of a recommendation to Board for approval. Assurance was provided that all relevant staff had completed fit and proper assessments.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the contents of report. • Approve the minor amendments to the Policy.
PERFORMANCE AND FINANCE	
TB21/012	<p>Chief Executive's Report including Integrated Performance Report</p> <p>The Board received a paper providing an update on the activities of the Trust Executive Group (TEG) and presented the Integrated Performance Report.</p> <p>An overview was presented on key matters presented in the report. This included: The operational plan for submission via West Yorkshire and Harrogate Integrated Care System (WY&H ICS), update on Culture review, Health and Wellbeing activities, staff retention, vaccination programme, and the work being progressed around agile working. The first meeting of the Integrated Commissioning Forum had been held. This had been a positive meeting focussed on strategic planning.</p> <p>There had been some delays to the implementation of the Unified Communications project. This was identified as a risk within the corporate risk register. Additionally, it was noted that with lockdown restrictions easing, it was expected that there would be an increase in demand which combined with longer call cycle times would impact on response times, which result in a longer call cycle. There had been number of operational challenges, however these were being managed.</p> <p>A discussion was held around the number of staff having received the Covid vaccine and whether there was any information regarding these being compulsory for staff. It was noted that a detailed breakdown was available to understand areas of low take up and no guidance had been issued around compulsory requirement. It was noted that 91.5% of all staff had received their first dose.</p> <p>Members received an overview of activities within A&E Operations noting that pressures had reduced. There had been significant impact from the levels of Covid related sickness absence and capacity and resource hours had been increased. Additionally, there had also been an increase in non-covid related absence within the Emergency Operations Centre (EOC). During Q3 2020/21 significant mutual</p>

aid was required, and pressures had since improved. Work would be progressed over the next 12 months to improve capacity at the York EOC.

Handover delays continued with challenges seen mostly in the south Yorkshire areas. There had been a spike in demand on 12 April 2021 following easing of lock down measures with an increase in alcohol and mental health related incidents.

Action

Board members requested an update on end of shift and mealtime arrangements and job evaluations linked to team-based working.

Members received an overview of the activities within the Integrated Urgent Care (IUC) directorate. This included, shielding staff had returned to work although processes had taken longer than anticipated to support staff back into their roles, there had been significant change to the out of hours service and planning was difficult as more members of the public were contacting 111 rather than primary care services.

New key performance indicators were being introduced in 111 with the average handling time having increased from 525 seconds, YAS currently at 595 seconds. It this increase in call handling time continued it would have longer term implications for capacity and resource.

Patient Transport service was operating at 81% business as usual. It is expected that 100% business as usual would commence between July and September 2021, with single patient journeys ending around July. However, it was anticipated that may be reactivated in the autumn.

A discussion was held around the impact of the national campaign for members of the public to call 111 first to reduce A&E attendance. It was noted that there has been an increase in calls to 111 first, although no reduction reported in A&E attendance. The Trust was undertaking a piece of work to identify the number of patients being transferred from 111 to 999.

It was anticipated that the next 'wave' would happen around mid-July with a further rise in the numbers of Covid cases. However, this may be muted through the vaccination programme. It would be unclear of the impacts of the vaccination programme until mid-summer.

Work continued to support staff health and wellbeing. The Trust had been working with Stonewall and an action plan developed to become an LGBT+ friendly organisation. Additionally, the Trust had won Gold at the learning and apprenticeship awards. The Board extended its congratulations and thanks to the teams involved.

An overview of activities from the Finance directorate was provided noting the procurement of a new warehouse. A discussion was held around considerations required for electric rapid response vehicles, noting that a review of carry kit on vehicles was being undertaken. It was noted that the Trust was looking to reduce vehicle emissions with an initial move towards hybrid vehicles; discussions had been held with staff regarding this.

Minute Ref:	<p>The Board congratulated nominees and winners of the STARS awards and expressed delight in the work of the Trust in supporting young people through the Prince's Trust.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Receive assurance on the activities of the Executive Team. • Receive the Integrated Performance Report.
TB21/013	<p>Service Transformation Report</p> <p>The Board received a paper providing an update on the current position and next steps in relation to the Trust Service Transformation Programme.</p> <p>Members noted the progress made regarding rotational paramedic model and areas for escalation relating to unified communications and N365 migration.</p> <p>A full review of the Transformation Programme was being undertaken with oversight from TEG. A revised approach for leadership and assurance across the transformation programme was in development and an update would be presented at a future Board meeting.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the progress made to date across Service Transformation programmes. • Note the use of the PMO documentation to support and enable delivery of Trust wide change programmes. • Note developments to the approved PMO Model including 'Introduction to Project Management' virtual training offer.
TB21/014	<p>Update on Financial Performance and Planning</p> <p>The Board received a presentation providing an update on performance during 2020-21 and financial planning for 2021-22.</p> <p>At the end of 2020-21 the Trust had performed well against plan with an anticipated £1,754,000 deficit to a final year end position of £960k deficit. This was a result of unexpected income due to an increase in carried over annual leave, national agreement for holiday pay ('Flowers') and a gap in 'other' income identified.</p> <p>Members noted the agreed principles around income for 2021-22. Funding would continue as block funding at a CCG level with an assumed rollover of H2 2020-21 plus 0.5% increase for 2021-22, system top up, investments in mental health, 111 first, covid funding.</p> <p>The draft plan 2021-22 would be submitted to ICSs, outlining a £3,000,000 deficit for YAS and an overall ICS position of £20,000,000 deficit. The Plan was to be reviewed and refined with a second draft being submitted on 29 April 2021. The final plan would be submitted on 3 June 2021 and would be considered by the Finance and Investment Committee and Board in May 2021.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the contents of the presentation.

Minute Ref:	
TB21/015	<p>2021-22 Capital Plan</p> <p>The Board received a paper providing an overview of the Capital Plan submission and see retrospective approval following the submission of the plan to NHSE/I on 9 April 2021.</p> <p>All capital resources would be agreed with WY&H ICS in collaboration with the ICS partner organisations. The current YAS capital funding requirement was £14,200,000, and therefore had agreed to contribute £1,500,00 of its allocated £15,744,000 towards the ICS shortfall.</p> <p>An overview was presented of the 2021-22 plan and mitigations. It was noted that there was an overall upside risk, as it was likely that not all allocated funding would be utilised.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Approve the 2021/22 Capital Plan. • Note the risks identified. • Support the proposal outlined in 5.2 in respect of allocating future capital funding, and • Support the recommendation in 5.3 to develop further (multi-year) schemes to obtain maximum value from the capital resources available and make best use of potentially higher funding available in future years.
RISK MANAGEMENT AND INTERNAL CONTROL	
TB21/016	<p>Risk Management Report including the Corporate Risk Register and Board Assurance Framework (BAF).</p> <p>The Board received the paper reporting recent material changes, areas of emerging risk and an update on the Board Assurance Framework.</p> <p>Members received an overview of section 4 of the report outlining new risks relating to social distancing in Callflex contact centre, CAD servers and the Scarborough paediatric pathway.</p> <p>Emerging risks had been identified in relation to unified communications, staff sickness and wellbeing.</p> <p>The majority of risks within the Board Assurance Framework remained current and would be reviewed for 2021-22.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the position regarding corporate risks. • Note the areas of emerging risk. • Note the internal audit review of risk management and the BAF • Note the position regarding the Board Assurance Framework

Minute Ref:	
TB21/017	<p>EPRR and Special Operations Six Monthly Report</p> <p>The Board received a paper updating the emergency preparedness, resilience and response and special operations agenda and associated work streams for the period of October 2020 – April 2021.</p> <p>It was noted that the recently appointed head of EPRR and special operations had undertaken a review of the department. The proposed changes were being managed via the Trusts change management process.</p> <p>Members were informed that Alastair Wilson OBE had been appointed to lead an independent review of the Yorkshire Air Ambulance / YAS partnership and make recommendations relating to the future clinical operating model.</p> <p>Work was being progressed in relation the annual self-assurance process against the EPRR Core Standards. It was anticipated that a report would be brought to Board regarding this in October / November 2021.</p> <p>It was agreed that a future Board development session would be used to refresh the Board of its responsibilities in relation to EPRR.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Receive assurance regarding the Trust’s compliance and progress of the EPRR / Special Operations agenda.
ITEMS FOR INFORMATION AND ASSURANCE (By exception only)	
TB21/018	<p>Report from the Chair of the Quality Committee</p> <p>The Board received a paper to outline the key discussions during the last Quality Committee meeting.</p> <p>It was noted that the Quality Committee would be increasing its frequency of meetings to twice every quarter. The Committee had also discussed the risk relating to the Trust not administering paracetamol as an analgesic and received assurance from the Executive Team that this was currently under review and was being progressed via the National Ambulance Service Medical Directors’ Group</p> <p>New standards for Counter Fraud had been introduced. The Audit Committee had discussed this and noted the work supported by the Trust’s counter fraud specialist in relation to this.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the report.
TB21/019	<p>Report from the Chair of the Audit Committee</p> <p>The Board received a paper to outline the key areas of discussion from the Audit Committee meeting held 13 April 2021.</p>

Minute Ref:	<p>The Committee had discussed a number of items including the transition to the new internal audit provider (360 Assurance). It was felt that the Trust was in a good position for the 2020-21 annual report and accounts process however had not been able to approve the External Audit Plan at its meeting and agreed for AC to take Chair's action.</p> <p>Members of the Board were informed an update had been presented on Counter Fraud and the recent changes to the Counter Fraud Standards. It was identified that this would be fed into a future Board development session.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the report
TB21/020	<p>Summary of meeting by Chairman:</p> <p>The Chairman provided a summary of the meeting noting that it was good to see work progressing around supporting staff through the use of body worn cameras and health and wellbeing initiatives. The Board had welcomed the update from LM as FTSU guardian which had highlighted the importance to provide clear guidance and support in relation to online bullying and the Trust's zero tolerance for bullying and harassment.</p> <p><i>LM left the meeting.</i></p>
FOR INFORMATION ONLY (not considered during the meeting)	
TB21/021	<p>NHS Provider Selection Regime Consultation Response FINAL</p> <p>The Board received a paper for information only which provided a summary of the NHS provider selection regime consultation proposals.</p>
TB21/022	<p>Future Working arrangements (EOC Training Centre)</p> <p>The Board received a paper for information only providing an update on planned relocation of the EOC Training Centre associated costs within a West Yorkshire Partnership Board building in Morley.</p> <p><i>The Board meeting was adjourned for lunch at 1235hrs and to resume at 1315hrs.</i></p> <p><i>Board resumed at 1315hrs.</i></p> <p><i>Note TG apologies for the afternoon session.</i></p>
MEETING AS THE YAS CHARITY TRUSTEE	
TB21/023	<p>Report from the Chair of the Charitable Funds Committee</p> <p>The Board received a paper outlining the key areas of discussion during the Charitable Funds Committee meeting 13 April 2021.</p> <p>The Committee had held discussions around the resource to support the Charity activity, the management of the CFR scheme and the significant support received from NHS Charities Together following an increase in applications for grants made to staff. The Committee had agreed to utilising a lottery provided by a third party to increase sustainability fundraising, this was due to be implemented in the next 1-2months.</p>

<p>Minute Ref:</p>	<p>Consideration was given to an NHS Memorial Forest. All options for taking this forward would be discussed at the next Charitable Funds Committee meeting to meet the seasonal cycle for planting.</p> <p>To note second paper after finance update – CFR scheme is key items on internal audit we need to address and JP/RB and MW to resolve the issues over next six months.</p> <p>The Committee formally received the Internal Audit Report commissioned by YAS NHS Trust. Limited assurance was given on the provision of risks around community fund raising schemes. However, included in the YAS Charity Business Plan and Strategy, the proposed new CFR governance arrangements, would be presented to the Trust Board (as Corporate Trustee) for final approval.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the report
<p>TB21/024</p>	<p>YAS Charity: Quarterly Financial Update</p> <p>The Board received a paper providing an update on YAS Charity’s financial position at the end of month 11 (Feb 2021).</p> <p>It was noted that a high-level of funds had been received during the year, recognising the uniqueness of this in the context of the pandemic. Section 3.10 of the report provided an overview of the position on all funds. It was noted that the Committee had been progressing work to realign the various CFR schemes in a more transparent way and align to the YAS NHS Trust approach for financial management. It was acknowledged that this was a legacy issue, when the three former charities merged to one YAS Charity.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the contents of the report.
<p>TB21/025</p>	<p>YAS Charity: Fund Designation 2021-22</p> <p>The Board received a paper reporting on designated funds from 2020-21 for the Board, and to request approval for provisional designations for grant making in 2021-22.</p> <p>A discussion was held around the impact of the pandemic to use funds during 2021. The Charity will have to take a more proactive approach during 2020-21 and the proposals for this were set out in section 3.1 of the paper.</p> <p>It was noted that the YAS Basics Doctors funds had been dissolved by the Trust, and therefore it has relied on the YAS Charity for funding. Therefore, clarification was sought in relation to the ability for the YAS Basics Doctors to raise funds within a similar structure as proposed for the CFR schemes.</p> <p>Action JM/PS/KV to discuss opportunities for YAS Basics Doctors to fundraise.</p>

Minute Ref:	<p>The Board resolved to:</p> <ul style="list-style-type: none"> • Approve the de-designation of 2020-21 funds, and the allocations of new designations as shown in 3.1, with the intention for use in the grant making programme for 2021-22. All grants would continue to be administered in compliance with the Committee's Terms of Reference and Disbursement Policy.
TB21/026	<p>CFR Fundraising Update</p> <p>The Board received a paper to provide an update on the adoption of Community First Responder Fundraising into the YAS Charity.</p> <p>Members received an overview noting that a risk had been identified, following the internal audit, around CFR scheme undertaking fundraising activities on behalf of the YAS Charity. There was a recognised requirement to ensure a consistent and central approach to provide robust financial governance of the funds raised.</p> <p>An action plan was presented detailing the proposed approach over the next six-months to implement a robust framework for CFR fundraising activity. It was identified that this would involve additional short-term administration support as well as Communications plans to facilitate clear messaging. It was noted that the work was being overseen by the interim Head of Community Resilience.</p> <p>The Chairman extended her thanks to PS and JP for work undertaken by the Charity noting the changes during the pandemic noting further work to be done from a governance and assurance perspective.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> • Note the contents of this report, and • Approve the action plan.
CLOSING BUSINESS	
TB21/027	<p>Key Points Arising & Review of the Meeting</p> <p>The Chairman provided a summary of the meeting, highlighting the updates around health and wellbeing of staff, Freedom to speak up and the work to progress around bullying and harassment issues, significant assurance received in relation to significant events, and update of the financial position.</p>
Date of the Next Meeting of the Trust Board Held in Public: 24 June & 27 July 2021	

The meeting closed at approximately 1347 hrs

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

_____ **CHAIRMAN**

_____ **DATE**