



**Trust Board Meeting in Public**

**Venue:** Videoconference

**Date:** Tuesday 27 July 2021

**Time:** 0930 hrs

**Board Members Present:**

Kath Lavery	(KL)	Chairman
Tim Gilpin	(TG)	Non-Executive Director / Deputy Chairman
Andrew Chang	(ACC)	Non-Executive Director
Anne Cooper	(AC)	Non-Executive Director
Amanda Moat	(AM)	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
Zafir Ali	(ZA)	Associate Non-Executive Director (NeXT Development)
Mandy Wilcock	(MW)	Director of People and Organisational Development
Simon Marsh	(SM)	Chief Information Officer

**In Attendance:**

Sarah Ferguson	(SF)	Interim Associate Director of Corporate Affairs
Dave Green	(DG)	Interim Associate Director of Quality and Safety
Juliana Field	(JF)	Head of Corporate Affairs
Laura Williams	(LW)	Dementia Project Coordinator
Alina Khan	(AK)	Head of Equality and Diversity
Steve Page	(SP)	Director of Transition

**Apologies:**

Claire Ashby	(CA)	Interim Executive Director of Quality, Governance and Performance Assurance
Karen Owens	(KO)	Interim Director of Urgent Care and Integration
Phil Storr	(PS)	Associate Non-Executive Director

**Minutes produced by:**

Odette Colgrave	(OC)	Executive Coordinator
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The meeting commenced at 0931 hrs.

Minute Ref:	
<b>OPENING BUSINESS</b>	
TB21/038	<b>Apologies and Declaration of Interests:</b> Apologies were noted for this meeting. Any declarations of interest would be considered during the meeting.

TB21/039	<p><b>Minutes of the Previous Meeting held on 27 April 2021 and 24 June 2021 including Matters Arising (not on the agenda) and</b></p> <p>The Minutes of the Meetings held on 27 April 2021 and 24 June 2021 were approved as a true and fair representation of the meeting.</p> <p>There were no matters arising from these minutes.</p> <p><b>Action Log</b></p> <p>Members reviewed the Action Log noting that all items were complete or not yet due.</p>
TB21/040	<p><b>Record of Urgent Decision – Airwave Contract</b></p> <p>The Board received the record of an intra-meeting decision taken by Board on 7 July 2021.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> <li>Formally note the record of decision taken 7 July 2021.</li> </ul>
<b>STRATEGY DEVELOPMENT &amp; BUSINESS PLANNING</b>	
TB21/041	<p><b>Chief Executive’s Year-end Report 2020-2021</b></p> <p>The Board received a presentation which provided an overview of the highlights from the year 2020-21.</p> <p>It was acknowledged that 2020/21 had been a year like no-other impacted by the Covid pandemic which presented increased demand and pressures across all three service and expressed condolences for the five colleagues who had died during the pandemic. The pressures had a significant impact on the morale of staff and RB expressed thanks to all YAS staff and other emergency services who had provided support during the year.</p> <p>The Trust’s ambitions for 2021 to 2023 were focussed on patient and communities and ensuring resources were managed wisely and effectively to support the delivery of safe and sustainable care.</p> <p>The response to Covid-19 had presented challenges and the requirement for innovation across the service, and the Trust was quick to adapt with the use of video triage, enhanced ambulance vehicle preparation arrangements, continued development of the electronic patient record, move to single patient journeys for patient transport service, procurement of personal protective equipment for colleagues and roll out of ICT to support home working arrangements. The Trust had also supported the launch of the national NHS111 First initiative with additional recruitment (both clinical and non-clinical) to the 111 contact centres to support delivery and worked with the Integrated Care System partners to develop alternative services to emergency departments.</p> <p>The Trust supported the establishment of the Nightingale Hospital in Harrogate and temporary ambulance station with volunteer staff from each of the region’s fire and rescue services to assist with blue light driving. Additionally, YAS supported vital and urgent Covid-19 related research activities.</p> <p>Additional assistance received from the YAS Charity supported health and wellbeing projects for all staff.</p>

The Trust continually looked to ensure delivery of the best possible response to patients noting the impact of the challenges faced on performance and delivery of the core standards. This included impacts on call taking, hospital handover arrangements response times and level of activity within the Patient Transport Service. However, the Trust took part in several pilot programmes to improve services for patients including Mental Health Ambulatory Service and rotational paramedics, working with system partners, as well as introduced several transformation changes during the Pandemic.

The Chairman acknowledged the work of the executive team and staff in continuing to deliver the service and increase working with communities during this time and displaying the One Team values as the Trust had worked together.

The Board resolved to:

- **Receive and note** the contents of the presentation.

*LW joined the meeting*

### QUALITY, SAFETY & PATIENT EXPERIENCE

TB21/042

#### **Patient Story**

The Board received a presentation and video which highlighted the dementia friendly engagement work with York Minds and Voices.

Members heard of the positive impacts of the service on the patient and how the project connected with acute hospitals and dementia friendly community to improve the experience of individuals with dementia and their carers.

It was noted that positive steps forward had been taken in relation to face to face training for staff and also Community First Responder volunteers. There had been an increase in the number of dementia friends across the Trust to 2,010. Members noted the next steps shared

Members thanked LW for the presentation, noting the excellent work and the defence it had made for the individuals in the story presented. Emphasis was given to the valuable work done in Patient Transport Service to support patients who become confused and distressed with the change of environment and the use of music or window blinds which make the journey less stressful.

The Board resolved to:

- **Note and receive** the contents of the presentation.

*LW left the meeting*

TB21/043

#### **Responsible Medical Officer Annual Report**

The Board received the Annual Report which served as the vehicle to provide assurance the Board, patients, the public, and the medical profession that the systems and processes underpinning medical revalidation are in place and are working effectively, to ensure that every licensed doctor's fitness to practise is monitored and assessed on a regular basis

A discussion was held around any consideration of the paper through the Quality Committee. It was noted that the report was considered at the Clinical Governance Group and that this Group regularly reported into the Quality Committee on clinical

governance matters, which were also highlighted in the report, this was confirmed by the Chair and members of the Quality Committee. It was suggested that future years the report be presented via Quality Committee and JM would further discuss with the Chair of Quality Committee governance requirements regarding appraisal and revalidation of medics employed within the Trust.

The Board resolved to:

- **Approve** the Statement of Compliance confirming that the Trust, as a Designated Body, is in compliance with the regulations.

*AK joined the meeting.*

## WORKFORCE

TB21/044

### Workforce Diversity Profile

The Board received a paper which set out the Workforce Profile of the Trust with a snapshot of the workforce data as of 31st March 2021, which also included data from 2019, 2020 and 2021 for comparison.

Members noted that the information provided opportunities for the Trust to identify any barriers individuals with protected characteristics and support work to achieve its objectives to employ a diverse workforce which were reflective of the communities served.

An overview of the highlights within the report and ongoing initiatives to support diversity within the Trust were provided. It was noted that a diversity census was to be launched during 2021, with the aim of better understanding the workforce, which would inform future initiatives to effectively support staff and continue to develop an inclusive working environment.

There were some variances in year-on-year data, specifically in relation to disability data due to the use of differing terminology within staff surveys and through the electronic staff record, where information was requested around both disability and long-term health conditions which were different.

As the Board lead for equality, diversity and inclusion AC expressed the Board's commitment to this agenda and provided assurance to colleagues around the regular briefings received in relation to this often-difficult area.

Members noted the importance of understanding the legacy stories and why staff may not wish to come forward to enable the Trust to put improvements in place; and build trust with staff that where information is being provided clear actions were being taken.

The Board resolved to:

- **Note** the contents of the report.
- **Support** the next steps and action plan.
- **Agree** to receive updates on the progress and actions.
- **Approve** the report to be published on the Trust's website.

*AK left the meeting*

TB21/045	<p><b>Improving and Equalising the Employment Experience</b> Members received a paper which provided a position update to the Board regarding the actions to meet the NHS England guidance for 'Improving and Equalising the Employment Experience.</p> <p>Positive progress has been made against the action plan as provided with most actions having been completed (appendix 1). However, it was highlighted that action 1a was ongoing with a view for this to be completed by October 2021 and was on track to achieve this deadline.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the contents of the paper and the progress made in relation to the reduction in the proportionality of BME and white staff entering the formal disciplinary process.</li> <li>• <b>Support</b> the Trust ongoing work and outstanding actions to meet the expectations in the guidance, specifically around consultations on the Disciplinary policy and procedure.</li> </ul>
TB21/046	<p><b>Chief Executive Report</b> The Board received a paper which provided an update on the activities of the Trust Executive Group and presented the integrated performance report for June 2021.</p> <p>Members received an overview of current performance and impact of operating at Resource Escalation Action Plan (REAP) level four. There had been an increase in the number of Category 1 (life threatening condition) calls as well as a high number of calls relating to paediatric and elderly patients. It was noted that due to the variances over the last year it was difficult to accurately forecast future demand and capacity requirements, and that this was being worked through with the planning teams.</p> <p>Staff absence levels remained high and significant sickness levels had a cyclical impact on service delivery and response time. Assurance was provided that work was ongoing to recruit to additional roles, increase fleet availability and to support the health and wellbeing of staff currently unwell.</p> <p>There had been a national announcement of additional funding for Ambulance Services and the Trust was in the process of preparing a response to how it would utilise the proportion allocated to YAS.</p> <p>A reduction in Covid rates following lockdown measures was positive, although it was anticipated that demand would increase moving into the Winter period which was traditionally a period of high demand across the whole NHS system, this was being closely monitored and plans put in place.</p> <p>There had been significant challenges in meeting standards for Category 1 calls and actions were being taken to minimise the impact on patient safety. There had been pressures seen across the ambulance sector as a whole and YAS was not in a unique position in relation to current performance levels.</p> <p>Team Based Working implementation was progressing well with some appointments to new roles already made and induction courses ongoing. A clinical review as also ongoing with the Yorkshire Air Ambulance in relation to the current operating model.</p>

A discussion was held around the way in which performance was measured in response time and a shift in focus to understand the impact of this for patients. It was noted that work was being done to identify any impacts on patients resulting from excessive response times and discussions were ongoing with Commissioners to seek system support when required. This was also being closely monitored by the Trust Executive Group. Consideration was also given as to the Risk appetite

An overview was presented on the incentive programmes in place to support service delivery and that there had been good engagement with staff side representative and learning from other ambulance organisations who had taken a similar approach. A discussion took place regarding the staffing models, risk appetite, pre-covid levels of demand, benchmarking data across the sector and information gathered through complaints data.

The Board resolved to:

- **Receive** assurance on the activities of the Executive Team.
- **Receive** the Integrated Performance Report for June 2021

*SP joined the meeting.*

TB21/047

### **Service Transformation Report**

Members received a paper providing an update on current position and next steps in relation to the Service Transformation Programme, and refreshed PMO model and documentation.

There had been a delay to the roll out of the mobile phones for staff due to software issues impacting the time taken to roll out the required system applications. Therefore, the timeline had deferred to August 2021.

Team Based Working was progressing well with the induction programme due to commence in October 2021.

A discussion was held around the structuring of the transformation programme and alignment with the Integrated care system strategic direction, the inclusion of change management and engagement, and integration of the Quality Improvement framework.

The Board resolved to:

- **Note** progress made across transformation programmes.
- **Note** and advocate the use of the approved PMO documentation to support and enable delivery of Trust wide change programmes.
- **Note** ongoing development to the approved PMO Model including 'Introduction to Project Management' virtual training offer – open to all staff.

*SP left the meeting.*

*The meeting adjourned at 1200hrs*

*The meeting reconvened at 1230hrs.*

## RISK MANAGEMENT AND INTERNAL CONTROL

TB21/048

### **Risk Management Report including Corporate Risk Register and Board Assurance Framework**

The Board received a paper which presented an overview of the material changes to the Corporate Risk Register, highlighted emerging risk and provided an update on the Board Assurance Framework.

An overview was provided with key areas highlighted around non-Covid related sickness absence, financial uncertainty and staff physical fitness and wellbeing.

A discussion was held around the number of risks on the risk register noting that there appeared to be a number of risks which could be moved into business as usual. It was noted that Quality Committee had requested a review of the Risk Register and Board Assurance Framework at that this would be brought to the Board Development session in August 2021.

A query was raised regarding action 187 – Cumulative effect of repeated moving and handling and why this had moved from a risk score of 12 to 15. It was noted that DG would liaise with the risk team to provide clarity regarding this risk.

#### **Action**

**DG to review the shift in risk score of Risk 187 from 12 to 15 and provide an update regarding any issues which may be impacting the risk score.**

The Board resolved to:

- **Note** the recent material changes to the Corporate Risk Register.
- **Note** the areas of emerging risk.
- **Note** the position regarding the Board Assurance Framework.
- **Note** the internal audit review of risk management and the Board Assurance Framework.

TB21/049

### **Corporate Governance Annual Report**

The Board received a paper which sought to provide assurance around the processes relating to maintaining compliance with the Trust's core governance arrangements. This included: Standing Orders and Scheme of Powers Delegated and Reserved to the Board and Standing Financial Instructions; Registers of Interest; Registers of Gifts and Hospitality; Members Expenses; Fit and Proper Person Declarations and application of the Trust Seal.

The Board resolved to:

- **Note** the content of the Report,
- **Receive assurance** that the Trust has appropriate systems and processes in place for the purposes described,
- **Approve**
  - the Sub-Committee terms of reference
  - proposed amendment to the Trust's Standing Orders Sub-Committee Chairpersons.

## ITEMS FOR INFORMATION AND ASSURANCE (By Exception)

TB21/050	<p><b>Report from the Chair of the Quality Committee</b> Members receive the report providing and overview of matters discussed during the meetings held 6 June and 17 June 2021.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the update and <b>receive</b> the approved minutes from the Meeting held 11 March 2021.</li> </ul>
TB21/051	<p><b>Report from the Chair of the Finance and Investment Committee; including the Committee Annual Report 2020-21.</b> Members receive the report providing and overview of matters discussed during the meeting held 17 June 2021.</p> <p>It was noted that the meeting scheduled 11 March 2021 had been cancelled due to operational pressure. However, papers (standing agenda items) were circulating to members for assurance. The Committee presented to the Board the Committees Annual Report for 2020-21.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the update and received the approved minutes from the Meetings held 10 December 2020 and 7 May 2021</li> <li>• <b>Formally receive</b> the Finance and Investment Committee Annual Report for 2020-21.</li> </ul>
TB21/052	<p><b>Report from the Chair of the Audit Committee; including the Committee Annual Report.</b> Members receive the report providing and overview of matters discussed during the meetings held 24 June 2021 and 8 July 2021.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the update and received the approved minutes from the Meetings held 13 April 2021 and 24 June 2021.</li> <li>• <b>Formally receive</b> the Audit Committee Annual Report for 2020-21.</li> </ul>
<b>MEETING AS THE YAS CHARITY TRUSTEE</b>	
TB21/053	<p><b>Report from the Chair of the Charitable Funds Committee</b> Members receive the report providing and overview of matters discussed during the meeting held 8 July 2021.</p> <p>The Board resolved to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> the update and received the approved minutes from the Meetings held 13 April 2021.</li> </ul>
<b>CLOSING BUSINESS</b>	
TB21/054	<p><b>Key Points Arising &amp; Review of the Meeting</b> The Chairman provided a summary of the meeting paying tribute to the efforts of the leadership team during a time of significant demand and that the papers were reflective of the difficulties faced by staff during this time.</p>
<b>Date of the Next Meeting of the Trust Board Held in Public: 26 October 2021</b>	



The meeting closed at approximately 1255 hrs.

**CERTIFIED AS A TRUE RECORD OF PROCEEDINGS**

\_\_\_\_\_ **CHAIRMAN**

\_\_\_\_\_ **DATE**

DRAFT