



Trust Board Meeting in Public

Venue: Videoconference

Date: Thursday 28 April 2022

Time: 10.00 – 11.00

Board Members Present:

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| Kathryn Lavery* | Chairman |
| Tim Gilpin* | Non-Executive Director / Deputy Chairman |
| Andrew Chang* | Non-Executive Director |
| Anne Cooper* | Non-Executive Director |
| Amanda Moat* | Non-Executive Director |
| Jeremy Pease* | Non-Executive Director |
| Rod Barnes* | Chief Executive |
| Kathryn Vause | Executive Director of Finance |
| Dr Steven Dykes* | Acting Executive Medical Director |
| Nick Smith* | Executive Director of Operations |
| Clare Ashby* | Interim Executive Director of Quality, Governance and Performance Assurance |
| Zafir Ali | Associate Non-Executive Director (NeXT Development) |
| Mandy Wilcock | Director of People and Organisational Development |
| Karen Owens | Interim Director of Urgent Care and Integration |
| Simon Marsh | Chief Information Officer |

In Attendance:

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| Helen Edwards | Head of Communications and Community Engagement |
| Arifa Chakera | Associate Director of Planning and Development |
| Suzanne Hartshorne | Deputy Director of Workforce and OD |
| Luzani Moyo | FTSU Guardian/EMT2 |
| Steve Page | Director of Transition |

Apologies:

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| Phil Storr | Associate Non-Executive Director |
| Kathryn Vause | Executive Director of Finance |

Minutes produced by:

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| Helen Greer-Waring | (HGW) | Executive Coordinator (Interim) |
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*Indicates voting Board members

Minute Ref:

OPENING BUSINESS

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| TB22/001 | Apologies and Declaration of Interests: |
| 001.1 | Apologies noted for this meeting for Phil Storr, Associate Non-Executive Director, and Kathryn Vause. |
| 001.2 | Any declarations of interest would be considered during the course of the meeting. |

Minute Ref:

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| TB22/002 | Minutes of the Previous Meeting held on 25 January 2022 including Matters Arising (not on the agenda) and Action Log. |
| 002.1 | The Minutes of the Meeting held on 25 January 2022 were approved as a true and fair representation of the meeting. |
| 002.2 | There were no matters arising. |
| 002.3 | Action Log The Action Log was reviewed and updated. |
| TB22/003 | Record of Urgent Decision |
| 003.1 | The Board received a paper outside of Board for Fairfield's York EOC Remodelling for an urgent decision. |
| 003.2 | Resolved: to formally note the urgent decision to approve the remodelling contract. |
| STRATEGY DEVELOPMENT & BUSINESS PLANNING | |
| TB22/004 | Business Planning 2022-23 (Including financial planning) |
| 004.1 | It was proposed that this item be deferred and presented to the next public meeting on 14 June 2022. |
| 004.2 | Resolved: The Board agreed to defer this item. |
| QUALITY, SAFETY & PATIENT EXPERIENCE | |
| TB22/005 | Patient Story |
| 005.1 | The Board received a video 'Annie's Story' reflecting on the experience of the daughter of a patient and the on-going impact of her contact with the ambulance crews. |
| 005.2 | The Chairman conveyed apologies on behalf of the Board and the Trust for what happened and appreciation for being brave enough to share her experience and producing the video. The video has been used in training and would continue to be used in sessions for new Emergency Care Assistants, and as part of the clinical refresher update to enable the learning from this case to be embedded within clinical teams. |
| 005.3 | Consideration was to be given to how the video can be used for learning more widely for example in the University setting for student paramedics. ACTION (C Ashby) |
| 005.4 | The Board discussed the process of restorative justice and considered whether it may be an appropriate mechanism to help the relative in this case to come to terms with what had happened. It was agreed that Clare Ashby would liaise with the relative who made the video to find out if she wishes to take part in restorative practice, noting that she has stated that making the video has helped. ACTION (C Ashby) |
| 005.6 | Resolved: to note the contents of the video. |

Minute Ref:

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| TB22/006 006.1 | Freedom to Speak Up Annual Report 2021-22 The Board received a paper providing an annual review of issues raised in development related to Freedom to Speak Up (FTSU) during 2021-22. |
| 006.2 | The Board was advised that a lot of work had been undertaken during the past year to refresh the Trust's FTSU policy and increase engagement. The report illustrated through the numbers of people engaged, that people felt increasingly empowered to raise concerns, which enables the organisation to act and resolve issues in a timely manner. |
| 006.3 | Jeremy Pease, Non-Executive Director, noted that the annual report was the first in this format and was very well presented, and suggested that the colour scheme, text and background of the report be checked for neurodiversity and inclusion compliance. |
| | ACTION (C Ashby) |
| 006.4 | Resolved: to note the content of the Annual Report and receive assurance on the actions taken and supports the plans for further developments |

WORKFORCE

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| TB22/007 007.1 | Gender Pay Gap Report The Board received a paper reporting on the 2021 Gender Pay Gap data and accompanying action plan, which aimed to address the gap between male and female pay. |
| 007.2 | The Board was reminded that the reporting period coincided with the Covid-19 Pandemic during which time a number of staff were compensated for undertaking additional duties outside of their standard contract. Therefore, the data may be skewed for this reporting period and for the next reporting period. |
| 007.3 | It was noted that out of the 212 NHS Trusts who reported for this year, the pay gap in YAS was ranked in the lowest 18 NHS organisations in the country. It was noted that whilst the Trust's gender pay gap was low, it would continue to make changes to existing practices and processes to not only reduce the gap but also improve staff experience. |
| 007.4 | Looking forward, the action plan for 2022-24 focused on six main areas: Branding; Communication & Transparency; Recruitment and promotion processes; Maternity, Paternity and Parental Leave Policies; Wellbeing and Retention; Supporting female staff; and Data Analysis. The Gender Action Plan for 2022/24 would be progressed and monitored by the Director of People and Organisational Development. |
| 007.5 | The Quality Committee would monitor the Gender Pay Gap as part of in-year monitoring process. |
| 007.6 | Resolved: to note the content of the report and support the next steps and actions to reduce the Trust's pay gap. |

PERFORMANCE AND FINANCE

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| TB22/008 | Chief Executive's Report and Integrated Performance Report |
| 008.1 | The Board received a report which provided an update on the activities of the Trust Executive Group (TEG) since the end of January 2022 and present the March 2022 Integrated Performance Report. |
| 008.2 | Members received an overview of the activities, noting that at the last meeting the Trust was dealing with the effects of the Omicron variant of the Covid-19 pandemic. Operational pressures eased in February but peaked again in March. Although case numbers remained high, infection rates had fallen during April. Throughout this period pressures at a national and local level on acute beds and Emergency Department capacity had impacted on ambulance handover times and patient response times. Although there were improvements seen since Easter, handover delays and response times remained a concern. |
| 008.3 | Following the easing of the operational pressures, the Trust had moved down from Resource Escalation Action Plan (REAP) level 4 to REAP level 3. This action coincided with the Government lifting of Covid-19 restrictions. The impact of the lifting of restrictions was felt across the organisation and consequently the decision was taken to go to REAP level 4. |
| 008.4 | The pressures, particularly around turnaround times at hospitals, have been recognised both nationally and regionally. The outcome of meetings and discussions was a national request to ICS system leads to develop plans to help ease pressures on urgent and emergency care and hospital handovers. |
| 008.5 | <u>Military Aid – Thank You</u> During January and February military personnel supported YAS with the transportation of patients between hospitals and non-emergency patient transport services (PTS). The military personnel from the Queen's Own Gurkha Logistic Regiment stood down their support at the end of February 2022. The Trust was extremely grateful for this military aid which helped free up staff to attend to serious and life-threatening cases. |
| 008.6 | Operations Directorate Members were advised that A&E Operations continues to experience significant challenges. An increase in Category 1 calls had placed additional pressures on already stretched resources and impacted the ability of the EOC to respond to increasing call volumes. The Chairman noted that despite the continued challenges, staff had delivered and continued to deliver, an excellent service to patients. |
| 008.7 | Members were advised that as well as improving efficiency the Trust was keen to support staff wellbeing and welfare as a key priority. The Trust was conscious of the impact of the sustained pressures on staff and patients. The challenge was to develop solutions to improve and maintain staff wellbeing so that they in turn could continue to provide excellent patient care. The Trust had in place a clear career pathway for operational staff. |
| | <i>CA Joined the meeting</i> |

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| 008.8 | IUC/111 Members were informed that the Trust is prioritising improvements across of all three service lines, looking at making sure all patients are receiving the best possible response not just in terms of high acuity but across 111 and PTS. |
| 008.9 | It was still a very challenging time in IUC, sickness was a big concern particularly around non-covid sickness. Employee engagement events have been undertaken with staff welcoming the opportunity to talk about what matters to them. The information gathered aligns with the progress plan. Uniform came very high in the requests from staff in IUC to help them feel a part of YAS. A small homeworking pilot it being run for health advisors. Work is also being undertaken looking at the team leader role within IUC. |
| 008.10 | Regarding the Single Virtual Contact centre, the Trust has developed good working relationships with NEAS and are working together to understand the differences and similarities. Agreement has been made to produce a combined paper for each executive board and that would be taken to TEG on 4 May. It was requested that an update be provided on the proposals around Single Virtual Contact Centre at a future meeting. ACTION (K Owens) |
| 008.11 | Members were advised that the new national social distancing guidance published on 14 April would have an impact, the Trust were taking a phased approach to cohort some patients whilst maintaining single patient transport to protect the most vulnerable. |
| 008.12 | Clinical Directorate Clinical leadership and supervision were key to delivering patient safety. It was noted that a Midwife developer had joined the organisation and had already proved to be very successful |
| 008.13 | A discussion took place around the increased demand from lower socio-economic areas and potential reasons for this, including pressures across primary care services. |
| 008.14 | There appeared to be some variance in relation Cardiac Arrest outcomes. The Board requested that the Quality Committee obtain and review the detail around variance in Cardiac Arrest outcomes. ACTION (S Dykes / C Ashby) |
| 008.15 | Quality, Governance and Performance Assurance Infection Prevention and Control guidance for call centre environments has been reviewed with the Trust opting to maintain the existing measures. <i>KO left the meeting</i> |
| 008.16 | Workforce & Organisational Development Directorate The health and wellbeing of staff was a key area of focus and was to be discussed in more detail when the Health and Wellbeing plan will be brought to the next Board meeting. |

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| 008.17 | Finance It was noted that the Trust had faced a challenging and uncertain year both operationally and financially. |
| 008.18 | Resolved: to receive assurance on the activities of the Executive Team and receive the Integrated Performance Report for March 2022. |
| TB22/009 | Service Transformation Programme Update |
| 009.1 | The Board received a paper which provided an update on the current position and next steps in relation to the Trust's transformation work, which during the second half of 2021-22 had been taken forward as part of the H2 plan. |
| 009.2 | The H2 Plan was organised into the following themes: <ul style="list-style-type: none">• Agile Operations, with a focus on our places• Patient-Centred, with a focus on our patients• Workforce, with a focus on our people• Digital Enablers |
| 009.3 | The dashboard identified two projects for escalation, as follows: Agile Operations: Logistics Hub. Delivery delays caused by timescales for legal work and requirement to confirm electrical supply capacity. |
| 009.4 | Digital Enablers: Personal Issue Smartphones. Operational pressures have impacted rollout of phones which is currently behind original plan. |
| 009.5 | The integrated approach between the Programme Management office and the Business Planning team would continue. This enabled the Trust to use resource more efficiently and fully realise the benefits of projects. This would align improvements and transformations to the areas which were of greatest risk to the Trust. |
| 009.6 | Resolved: to note the governance, reporting and assurance arrangements relating to transformation work, note the status of individual projects and workstreams as set out at Appendix 1, and note the strategic risk relating to capacity and capability to plan and deliver transformational change. |
| RISK MANAGEMENT AND INTERNAL CONTROL | |
| TB22/010 | Risk Management Report including Corporate Risk Register and Board Assurance Framework Report |
| 010.1 | The Board received a paper summarising the Trusts key risk exposures; reporting recent changes to the Corporate Risk Register; Drawing attention to identified areas of emerging risk and providing an update on the Board Assurance Framework. |
| 010.2 | It was noted that the risk to patient safety continued to be the most critical concern. The risk of patient harm resulting from the handover delays remained the most significant individual risk managed by the Trust although mitigating actions were being taken. |
| 010.3 | The Board's attention was drawn to the risk posed by cybercrime including phishing emails and denial of service; both of which could have a significant adverse impact |

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| 010.4 | on the Trust's ability to maintain the operating service and as such were considered high. The Board was encouraged to see reference to key mitigating actions. The information was also indicative of the improvements made in relation to the organisation's risk maturity which had been developed with the input of key personnel. However, it was acknowledged that there remained areas for further development. |
| 010.5 | Resolved: to note the Trust's key risk exposures, note the recent material changes to the Corporate Risk Register, note the areas of emerging risk, and note the strategic risks captured in the Board Assurance Framework |
| TB22/011 011.01 | Annual Corporate Governance Report The Board received a paper providing an update on the Governance actions and processes. |
| 011.02 | Resolved: to note the content of the Report and received assurance of the processes in place to support compliance with core corporate governance arrangements. |
| ITEMS FOR INFORMATION AND ASSURANCE (By Exception) | |
| TB22/012 012.1 | Report from the Chair of the Quality Committee The Board received the report providing an overview of matters discussed during the meetings held on 3 March 2022 and 24 March 2022 |
| 012.2 | The risks around handover delays had already been discussed in the Board meeting. |
| 012.3 | The Board extended its thanks to Tim Gilpin, Non-executive Director, for chairing the Committee for the past three years. |
| 012.4 | Anne Cooper, Non-executive Director, would be taking over as Chair of the Quality Committee. |
| 012.5 | Resolved: to note the contents of the report. |
| TB22/013 013.1 | Report from the Chair of the Finance and Investment Committee The Board received the report providing an overview of matters discussed during the meetings held on 24 March 2022 |
| 013.2 | Resolved: to note the contents of the report. |
| TB22/014 014.1 | Report from the Chair of the Audit Committee The Board received the report which provided an overview of matters discussed during the meeting held on 12 April 2022. |
| 014.2 | Andrew Chang, Chair of the Audit Committee, brought to the attention of the Board opportunities for improvement highlighted by the Internal Auditors around the way |

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| | <p>in which the Board Assurance Framework was considered and supported the structuring of Board meetings. It was requested that Clare Ashby to work with the Chairman and CEO around creating greater focus on risks highlighted in the Board Assurance Framework.</p> <p style="text-align: right;">ACTION (C Ashby)</p> |
| 014.3 | The Committee had Produced an annual report, Andrew Chang advised the Board he was open for questions on or offline. He advised the Board that the Committee had made a minor change to the Terms of Reference |
| 014.4 | Resolved: to note the contents of the report, receive the Annual Report of the Audit Committee and Approve the Committee Terms of Reference. |
| Items for Information | |
| TB22/015 | None to note |
| Close of the Meeting held in Public | |
| TB22/016 | Key Points Arising & Review of the Meeting |
| 016.1 | <p>The Chairman provided a summary of the meeting, noting:</p> <ul style="list-style-type: none"> • The item on business planning was deferred to the next Board meeting, and acknowledging the impact of the patient story and the level of discussion prompted by this. • The gender pay-gap report demonstrated there was scope and need to see improvements next year. • That significant assurance was received from the CEO report. It was recognised that a lot of hard work was ongoing across the Trust and the ongoing pressures remained. • There had been good progress against the service transformation programme, despite pressures. • The Risk Report was received and would be taken forward with points raised. • The Annual Corporate Governance Report was received and clear to understand. |
| 016.2 | The Chair thanked everyone for their honesty and input throughout the meeting. |
| MEETING AS THE YAS CHARITY TRUSTEE | |
| TB22/017 | Report from the Chair of the Charitable Funds Committee |
| 017.1 | The Board (as Corporate Trustee) received the report which provided an overview of matters discussed during the meeting held on 7 April 2022. The Board was asked to consider the Committee terms of reference, the creation of a death in service provision and designation for staff and volunteers, and the purchase of a charitable accounting system. |
| 017.2 | It was noted the charity had seen an increase in requests for financial assistance from staff; the memorial wood had been agreed at the Fairfield site in York, and good progress has been made in relation to a number of outstanding Community First Responder issues regarding fundraising. |

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| 017.3 | Resolved: to note the contents of the report, approve the Terms of Reference and YAS Charity workplan, as recommended by the Committee, support the recommendation to create a death in service provision and designation for staff and volunteers, and support the recommendation to purchase the recommended charitable accounting system. |
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CLOSING BUSINESS

Date of the Next Meeting of the Trust Board Held in Public:

- **14 June 2022** Extraordinary meeting to receive and approve Annual Report and Accounts
- **26 July 2022**

The meeting closed at approximately 11.00hrs.

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

_____ **CHAIRMAN**

_____ **DATE**

DRAFT