

Minutes of the Trust Board Meeting (held in Public)

Venue: Videoconference

Date: Tuesday, 2 February 2023

Time: 0930hrs

Board Members Present:

Anne Cooper* Non-Executive Director (Chair of the meeting)

Andrew Chang* Non-Executive Director
Amanda Moat* Non-Executive Director
Jeremy Pease* Non-Executive Director

Rod Barnes* Chief Executive

Kathryn Vause * Executive Director of Finance
Steven Dykes * Acting Executive Medical Director
Phil Storr Associate Non-Executive Director
Zafir Ali Associate Non-Executive Director

Mandy Wilcock Director of Workforce and Organisational Development

Karen Owens Director of Urgent Care and Integration

Simon Marsh Chief Information Officer

In Attendance:

Helen Edwards Head of Communications and Community Engagement

Jeevan Gill

Adam Layland

Rachel Gillott

Dave Green

System Partnership Director – North Yorkshire
System Partnership Director – South Yorkshire
System Partnership Director – West Yorkshire
Interim Associate Director of Quality and Safety

Jackie Cole Interim Deputy Director of Operations

David O'Brien Associate Director of Risk and Performance Assurance (TB22/077 only)

Observing:

Usman Niazi Specialist Assistant Assurance Manager – 360 Assurance (Internal Audit)

Michael Proctor Member of the Public

TB22/070 | Welcome and Apologies

O70.1 Apologies were received for Tim Gilpin* Acting Chair, Clare Ashby* Interim Executive Director Quality, Governance and Performance Assurance, Nick Smith* Executive Director of Operations, and Lynn Hughes Interim Company

Secretary.

070.2

Dave Green attended the meeting on behalf Clare Ashby, and Jackie Cole attended the meeting on behalf of Nick Smith

070.3

Anne Cooper, Non-Executive Director and Senior Independent Director took the Chair. The meeting was quorate.

TB22/071 | Declaration of Interests

There were no declarations of interests reported in relation to open agenda items. It was noted that any declarations of interest would be considered if and when they occurred during the meeting.

^{*}Indicates voting Board members

TB22/072 | Minutes of Previous Meetings

072.1 **Resolved:** the draft minutes of the meeting held 1 November 2022 were

approved as a true record.

TB22/073 | Action Log

O73.1 The action log was received and noted. Actions TB21.005 and TB22.009 were agreed to be closed.

TB22/074 | Matters Arising

074.1 There were no matters arising in addition to those included on the agenda.

TB22/075 | Patient Story

- Dave Green introduced the Aleema's Story. Aleema suffered from 55% burns and as a consequence of that she had a 10% chance of survival. A video was shared which enabled Aleema and the crews experiences of the incident to be shared.
- O75.2 Dr Steven Dykes highlighted the learning, which included the importance of quickly identifying where a patient is critically ill to ensure that the right help is identified and provided as soon as possible. Dr Dykes stated that work was being progressed with business intelligence colleagues, the wider system, and YAS Senior Clinical Fellow to focus on the feedback from an academic level to gain a better understand to improve responses to incidents in the future.
- Karen Owens thanked Aleema for the powerful story and commended the level of care provided by the crews. It was acknowledged that there are many similar cases attended by crews and it was suggested that further consideration should be given to trauma informed practice and how the Trust can develop its own training and support for staff.
- The Chair of the meeting queried the feedback mechanisms that were in place within the Trust. In response, Dave Green explained that the introduction of Schwartz Rounds as a CQUIN had created opportunities for the Trust to learn and change support offered to crews.
- O75.5 Adam Layland queried if the Trust had plans to share Aleema's story across the Trust. In response, Dave Green explained that there was an opportunity to share with the local incident groups and consideration would be given on how to share more widely across the Trust.

 ACTION (C Ashby)
- 075.6 The Chair extended the Board's thanks to Aleema for sharing her story.
- 075.7 **Resolved:** the patient story was noted.

TB22/076 | Chair's Report

- The Chair of the meeting provided a verbal update, noting that NHS England had confirmed the re-appointment of Jeremy Pease as a Non-executive Director for a further two-year period, and that Zafir Ali had been appointed by the Trust as an Associate Non-Executive Director.
- 076.2 **Resolved:** the appointments to the Board were noted.

David O'Brien Joined the meeting.

TB22/077 | Risk Management Report: including Board Assurance Framework

077.1 David O'Brien highlighted the key risks and changes to the Corporate Risk Register and Board Assurance Framework since it was previously presented to the Board.

077.2 David drew attention to:

Risk 523 – Industrial Action, which due to the current position it was was believed to be higher than the original risk score of 16;

Risk 525 – Long term funding arrangements from the ICS had been reframed around financial uncertainty; and

Risk 526 -Intermittent faults affecting usability of the CORPULS3 device during cardiac arrest scenarios, risk score of 20.

- The Chief Executive provided further detail on the risk relating to CORPLUS3 devices, which had been discussed by the Trust Executive and Trust Management Groups with the risk continued to be monitored. Assurance was provided that the supplier had identified that the issue related to software errors and the supplier was working to achieve a resolution. Kathryn Vause added that the supplier had also been approached to support the Trust with the roll out of the software to devices.
- David O'Brien explained that the review of the BAF in Autumn 2022 included strengthening controls and assurances of the strategic risks.
- Amanda Moat, Non-Executive Director, confirmed that the Board were well sighted on risks and in her opinion she felt they were being managed well. Amanda queried if considerations on the longer-term solutions were considered when reviewing risks/risk actions. In response, David O'Brien confirmed that this formed part of the planning process and formed part of the risk discussions, which was being built into the work progressing around the YAS future ways of working programme.
- O77.6 Phil Storr, Associate Non-Executive Director queried how risks were linked or aligned to the Integrated Care Systems noting the requirement for closer system working and potential impacts for the Trust. In response, David O'Brien explained that some system risks were included on the Trust's risk register and work was progressing with all three Integrated Care Boards around management of risk and learning from other systems for emerging good practice. It was requested that a progress update is provided to a future Board meeting.

 ACTION (C Ashby)
- O77.7 Andrew Chang, Non-Executive Director noted the work progressing by ICBs in relation to benchmarking and developing baseline risks across Places, noting a requirement for the Trust to understand its position at Place.
- O77.8 Adam Layland confirmed that the System Partnership Directors were discussing with system colleagues handover risks. Jeremy Pease, Non-Executive Director queried if the discussions were specifically related to handovers or included wider areas of risk. In response, Adam stated that hospital handovers were the current main focus due to the level of risk but discussions were taking place to gain a greater understanding on system risks and how partnership working can mitigate risks for the Trust and the wider system.
- O77.9 Steven Dykes noted the discussions around risk held at Clinical Reference Group meetings, and the collation of data to gain a better understand on risk.

- It was noted that the updates on the work across systems would routinely be provided in future Risk Management Reports to the Board.
- 077.11 **Resolved:** the position regarding corporate risks and the Board Assurance Framework were noted.

David O'Brien left the meeting.

TB22/078 | Significant Events and Lessons Learned

- 078.1 Dave Green presented the data within the report for Q2 2022-23.
- Jeremy Pease, Non-Executive Director, noted the report covered the period April to September 2022 and asked if information was available for October 2022 to January 2023, specifically in relation to patient related incidents indicated in section 4.2 of the report. In response, Dave Green advised that there had been a significant increase which was attributed to service pressures and handover delays. Jeremy queried if there was scope for additional resource to support the investigations work. In response, the Chief Executive noted that options for additional support were being considered by the Trust Executive Group.
- Amada Moat, Non-Executive Director queried if feedback and learning was considered from an equality and diversity perspective to obtain a deeper understanding on the Trust's inclusive approach when applying learning. In response, Dave Green explained that the 'After Action Review' considered all aspects of a particular case but not all patients disclosed their own personal circumstances.
- O78.4 Steven Dykes explained that there were a number of quality streams where equality and diversity challenges were considered as part of the review and some inconsistency of application had been noted. Karen Owens noted that further work was underway around neurodiversity including training for staff, and it was anticipated this would be used to enhance the experience of patients.
- Adam Layland queried if the data included near misses. In response, Dave Green noted that the Low No-harm Group had discussed near misses and was anticipated that near misses would be discussed more locally in future with themes and trends identified to empower teams to feel confident to raise and learn from near misses.
- O78.6 Chair of the meeting advised that the Quality Committee had requested information is presented on a year-on-year basis to gain a better understanding on trends and to provide clarity around the impact of Covid.
- Zafir Ali, Associate Non-Executive Director drew attention to section 5.7 of the report :complaints and concerns response timescales, which were significantly higher in IUC than in any other area and queried if there was learning from IUC that could be shared with other areas across the Trust. In response, Dave Green agreed further work would be explored to gather the learning from IUC to share across the Trust.

 ACTION (C Ashby)
- Dave highlighted the positive feedback received from patients, which provided evidence of how they valued the service and had experienced good service. The

Board were pleased to note that despite the increased pressures staff continued to provide a positive experience for patients.

078.9

Chair of the meeting drew reference to the work taking place to improve patient communication, which was linked to the patient safety strategy. She explained that the Trust was looking to expand connections across the wider community areas.

078.10

Resolved: the Significant Events and Lessons Learned current position and assurance received in regard to the effective management of, and learning from, adverse events was noted.

TB22/079 | Chief Executive's Report

- The Chief Executive was received and noted. The Chief Executive drew reference to information published at a national level and highlighted December 2022 as the busiest month of the year from an emergency and urgent care perspective, with 20% growth of category 1 incidents across the ambulance sector. December 2022 was further complicated by industrial action taking place and the Trust had worked closely with Trade Union colleagues during that time, which enabled good relationships to be maintained. The Chief Executive extended thanks to staff and volunteers from the Trust, as well as other public services who supported the Trust during that time.
- He also drew attention to the impact of delays on category 2 patients, improved response times in January 2023 for 111/IUC, and challenges around resourcing. It was anticipated the Trust would experience greater financial challenges during 2023-24, due to national funding limits and there had been a gradual increase in demand back to 'normal' levels.
- The YAS Future Ways of Working programme was progressing and a number of workshops had been held around integrated planning and embedding new system leadership arrangements. Phase two of the Operating Model programme would shortly be launched for consultation.
- O79.4 Chair of the meeting queried if the Trust was contributing to the work around paramedic training and the national workforce plan via the Association of Ambulance Chief Executives (AACE). In response, the Chief Executive confirmed that the Trust was engaged in the work via AACE.
- The Chief Executive invited directors to provide an update for their respective areas of responsibility with attention drawn to the following:

079.6 Operations Directorate

- Jackie Cole provided an update noting that, EOC and A&E Operations, December 2022 and January 2023 had been challenging due to increased patient acuity, handover delays and job cycle time.
- O79.6.2 Collaborative work with partners continued to improve handover times at hospital sites, and innovative and robust solutions were being sought.
- A cross department group had been established to support Winter Planning, which had providing an agile response to issues and enabled lessons learned to be shared and improvements made.

- There were a number of new initiatives being launched through the Community Resilience team, with successful training of security guards at Meadowhall as community first responders, with a view to rolling this model out at a number of shopping centres across Yorkshire. Additionally, the Trust was working with Barnsley College to offer Community First Responder Training to Health and Social Care students.
- O79.6.5 Jeremy Pease, Non-executive Director noted the success of rapid improvement workshops with mid-Yorkshire and queried if these would be rolled out in other areas. In response, Jackie Cole explained that there were plans in place to roll-out across Yorkshire.

079.7 Integrated Urgent Care

- 079.7.1 Karen Owens explained that overall the position was positive despite December 2022 had been challenging with increased calls relating to scarlet fever and flu. Performance had seen improvements against the average speed to answer and abandonment rates under 5%.
- O79.7.2 Sickness absence continued to be a concern. It was noted that a review of the management of sickness absence had been commissioned to confirm compliance and to ensure staff were continued to be supported to fit their needs.
- Discussions were being held around team-based working as part of the business planning processes and a risk had been identified in relation to the Adastra system following a system upgrade, which would continue to be monitored.

079.8 Patent Transport Service

- Performance over the quarter remained stable, with a plan in place to return to 60/40 split of using the YAS core team and alternative response. Discussions were ongoing with ICBs around new national eligibility guidance for patient transport service.
- Jeremy Pease, Non-executive Director queried the current spend on the 40% within the split of the core team and the alternative response. Karen Owens explained that she was unable to provide a response at that time and it was agreed that the information would be shared outside of the meeting.

ACTION (K Owens)

O79.8.3 Phil Storr, Associate Non-executive Director noted the eligibility criteria was driven by a clinical need and queried if there had been any input on the impact on population inequalities and alternative transport arrangements. In response, Karen Owens explained that considerations had been made to a person's ability to travel in addition to their clinical condition. A trial was in progress in relation to an alternative transport desk where patients who did not meet the criteria could be signposted to other alterative services.

079.9 Clinical Directorate

- O79.9.1 Steven Dykes provided an update noting that the Clinical Strategy was being taken forward with focus on alternative pathways to bring organisations together and to look at ways to reduce inconsistency across the region.
- 079.9.2 The Academic Research Unit has support from the national institution of health research though additional funding. The Trust is progressing many interesting and

exciting studies, with one focussed on the use of analgesia in urgent and emergency care.

079.10 Quality, Governance and Performance Assurance

- Dave Green drew attention to section 3.41 of the paper which referenced work in relation to infection prevention and control (IPC). It was noted that an IPC specialist had been recruited and a new IPC manual for staff was under development.
- O79.10.2 The Trust continued to track themes and trends relating to the Patient Safety Incident Response Framework in a proactive way to pick up incidents and to ensure there are clear reporting arrangements in place.
- The Chair of the meeting noted that some of the work of the Quality, Governance and Performance Assurance directorate would impact on the Trust's transformation plans and the overall transformation the Trust needed to make in the new system environment. The Chief Executive explained that a review of the transformation programme was in progress and it was noted that plans were in place to report that to the Quality Committee.

079.11 People and OD Directorate

- Mandy Wilcock provided a verbal update noting the main areas of activity across the directorate had been on recruitment and training, with particular focus on staff wellbeing and improving sickness absence across the Trust.
- Mandy extended thanks to all staff who supported the picket lines and undertook training to support the EOC during industrial action days. Mandy also thanked Trade Union colleagues and the way in which everyone worked together in a professional, supportive and respectful way during unprecedented conversations.

079.12 | Finance Directorate

- 079.12.1 Kathryn Vause provided an update noting that the revenue position at Month 9 still forecasted a breakeven plan. There were several changes to indicate a 'best case' position of a surplus, with underlying changes, which had led to potential improvement of circa £3M and technical adjustment of the discount factor with forecast benefit of £2M, resulting in a potential £5M surplus position.
- O79.12.2 It was noted that there had been pressures managing Capital during the year for all NHS providers due to supply chain issues encountered when ordering items. However, it was noted that since the paper was prepared the Trust had been notified that van conversions, previously expected to be completed in early 2023-24 due to testing of equipment for safety were anticipated to be completed before the end of the financial year.

079.13 | ICT Directorate

- O79.13.1 Simon Marsh provided an update noting that the main focus during the last few months had been on the mobile data vehicle solution, which was under development with the national ratio replacement programme. It had been identified through testing that some functionality required fixes to resolve the issue.
- O79.13.2 It was noted that Session Limitation Protocol (SIP) technology for call centres was replacing digital ISDN, which was being withdrawn and required an accelerated programme to exchange the 111 and 999 contact centres. However, alternative arrangements had been established to support business continuity.

079.13.3 The Chair of the meeting expressed frustration in the lack of pace of feedback from the Yorkshire Care Record, which was critical to the Trust to understand outcomes. and improve support provided to patients. 079.13.4 Andrew Chang, Non-executive Director noted the recent media coverage around the CQC report for another ambulance service, which highlighted the importance of Freedom to Speak up and culture. The Chief Executive noted the emphasis the Trust had on Freedom to Speak up, and that the learning culture was central to the Future Ways of Working programme. 079.13.5 Jeremy Pease, Non-executive Director drew attention to section 4.4 of the Chief Executive report, which highlighted the Trust's Financial Wellbeing campaign, acknowledging that whilst staff were coming to work experiencing increased pressure, many staff were also affected by the cost-of-living pressures. Jeremy queried if there was an opportunity to work with the Trust's Charity to provide additional support to staff who needed it. In response, the Chief Executive referred to the positive feedback received from staff regarding the wellbeing initiatives in place at the Trust and specifically in relation to the Financial Wellbeing campaign. Resolved: assurance was received on the activities of the Executive team and the 079.14 Integrated performance Report for December 2022 was noted. TB22/080 **Report from the Chair of the Audit Committee** 080.1 Resolved: the Audit Committee Chair's report from the meeting held on 17 January 2023 was received and noted. TB22/081 Report from the Chair of the Quality Committee 081.1 Resolved: the Quality Committee Chair's reports from the meetings held on 24 November 2022 and 8 December 2022 were received and noted. TB22/082 Report from the Chair of the Finance and Investment Committee 082.1 **Resolved:** the Finance and Investment Committee Chair's report from the meeting held on 1 December 2022 was received and noted. TB22/067 **Any Other Business** There was no other business. 067.1 TB22/068 Risks 068.1 The Chair of the meeting reflected on pressures in the system and how that impacts on staff and outcomes of patients. She noted the increase in patient harm during the last quarter and that the Trust would continue to monitor and provide assurance to the Board. 068.2 It was with sadness that the news of Darren Lee's (Head of Community Resilience) passing was shared with the Board, noting that the Trust's thoughts were with Darren's family. TB22/069 **Evaluation of Meeting and Key Points Arising** The Chair of the meeting thanked members for their open debate and quality of

papers presented.

Meeting Closed at 1128hrs

Date of Next Meeting if the Trust Board (held in Public)

• 27 April 2023

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

 CHAIRMAN
DATE