



Minutes of the Board of Directors Meeting (held in PUBLIC)

Thursday 26 September 2024 at 09:30

Venue: Kirkstall, Fountains and Rosedale, Trust Headquarters, Wakefield

Voting Directors:

Martin Havenhand	Chair
Tim Gilpin	Non-Executive Director/Deputy Chair
Anne Cooper	Non-Executive Director (Senior Independent Director)
Jeremy Pease	Non-Executive Director
Andrew Chang	Non-Executive Director
Amanda Moat	Non-Executive Director
Peter Reading	Chief Executive
Nick Smith	Chief Operating Officer
Dave Green	Executive Director of Quality and Chief Paramedic
Julian Mark	Executive Medical Director
Kathryn Vause	Executive Director of Finance

Non-Voting Directors:

Marc Thomas	Deputy Chief Executive
Mandy Wilcock	Director of People and Organisational Development

Contributing Directors:

Adam Layland	Director of Partnerships and Operations (South Yorkshire)
Rachel Gillott	Director of Partnerships and Operations (West Yorkshire)
Jeevan Gill	Director of Partnerships and Operations (Humber and North Yorkshire)
Carol Weir	Director of Strategy, Planning and Performance
David O'Brien	Director of Corporate Services and Company Secretary
Sam Robinson	Chief Digital Information Officer

In Attendance:

Rebecca Randell	NEXT Director
Helen Edwards	Associate Director of Communications and Community Engagement
Lynsey Ryder	Head of Corporate Affairs
Odette Colgrave	Corporate Business Officer (minute-taker)
Jo Jennings	Senior Executive Officer

Apologies:

Andrew Chang	Non-Executive Director
--------------	------------------------

BoD24/07/1	Welcome and Apologies
1.1	Martin Havenhand welcomed all to the Board.
1.2	Apologies were received from Andrew Chang.
1.3	The meeting was quorate.
BoD24/07/2	Declaration of Interests
2.1	No declarations of interest were reported. If any declarations of interest arose during the meeting these would be considered at that time.
BoD24/07/3	Minutes of Previous Meeting
3.1	The minutes of the meeting of the Board of Directors held in public on 25 July 2024 were approved as an accurate record subject to the following amendment: <ul style="list-style-type: none"> • 14.4 Julian Mark advised that during 2014 there was a sudden spike in response times which contributed to an increase in long lies.
3.2	There were no matters arising.
BoD24/07/4	Action Log
4.1	All actions were completed and closed.
BoD24/07/5	Patient Story
5.1	Dave Green introduced the patient story. The Story of Antony Powers, 'Tiny', told by his wife Chris, who suffered a cardiac arrest and died at home. Chris shared experiences of the response from the Trust and areas of learning were: <ul style="list-style-type: none"> • Family liaison officers to build a relationship with family member[s]. • Duty of candour letter has now been reviewed. • Extra guidance on why patients who suffer cardiac arrests need to be on the ground to perform cardiopulmonary resuscitation (CPR).
5.2	Chris has joined the Trust's Critical Friends Network and is raising funds for more defibrillators in the area.
5.3	Julian Mark advised that the scripts for cardiac arrests in NHS Pathways can be reviewed and colleagues will discuss this at the Clinical Governance Group . (ACTION: Julian Mark)
5.4	Jeevan Gill raised whether the defibrillators could use languages other than English. Dave Green advised that English is the only language available.
5.5	Julian Mark to ask the Clinical Governance Group to review the issues discussed. (ACTION: Julian Mark)
5.6	Martin Havenhand asked for thanks to be sent to Chris on behalf of the Board.
5.7	Resolved The Board noted the contents and areas of learning.

BoD24/07/6	Chair's Report
6.1	<p>Martin Havenhand presented the Chair's report and drew attention to the following key points:</p> <ul style="list-style-type: none"> • A Board Development Day facilitated by Integrated Development is taking place on 14 November. • The objectives for the Chair and Non-Executive Directors for the period 2024/25 have been agreed and these are included at Appendix A. • The Doncaster Pride event had an impressive number of Trust staff who volunteered generally and specifically contributed to the CPR training , all staff were thanked for their involvement.
6.2	<p>Resolved The Board noted the report.</p>
BoD24/07/7	Chief Executive's Report
7.1	<p>Peter Reading presented the Chief Executive's report and drew attention to the following key points:</p> <ul style="list-style-type: none"> • Following the period of violence and civil unrest during August 2024, the Trust provided support for colleagues and our Race Equality Network. • The Trust learned a lot of lessons from our vulnerable Black and ethnic minority (BAME) staff from our Rotherham Contact Centre. It was evident that more engagement was required with our Muslim staff. A statement was issued that no racist behaviour would be tolerated. • It was also noted that the prayer facilities are not adequate and we need to address this issue. • Feedback was excellent following the long-service awards events. • Publication of the Darzi report is a good opportunity for the ambulance sector to take a role in developing pre and post hospital care.
7.2	<p>Jeevan Gill thanked Peter for his actions and continued support with the Race Equality Network and staff during the civil unrest although further concerns are still being raised.</p>
7.3	<p>Mandy Wilcock added that the People report showed highlights and lowlights on how the Trust responded to the civil unrest. It was evident that some flexibility from managers to support staff was not consistent across the Trust and lessons will be learned.</p>
7.4	<p>Anne Cooper confirmed she had conversations with ambulance crews who attended the riots close to the hotel who all felt supported by the Trust.</p>
7.5	<p>Resolved The Board noted the report.</p>
BoD24/07/11	Finance and Performance Committee Chair's Report
11.1	<p>Amanda Moat, in her capacity as Chair of the Finance and Performance Committee, presented the Finance and Performance Committee report relating to the meeting held on 23 July 2024 and the month 3 financial performance.</p>

- 11.2 The key points discussed were:
- There is a delay in the delivery of vehicles, however revised plans with the converters will see all vehicles delivered by November 2024.
 - Finance revenue update; in month 4, invoicing will reflect 2024-25 contract income expectations and should rectify the cash/interest receivable deficit incurred from the planning delay.
 - Risks discussed included the impact of inflation on pay award and potential cost pressure.

11.3 **Resolved**
The Board noted the report.

BoD24/07/12 **Operational Assurance Report**

12.1 Nick Smith presented the Operational Assurance Report.

- 12.2 Highlights were:
- Secured non-recurrent funding to improve Category 2 performance.
 - Implemented GPs into the Emergency Operations Centre (EOC) and incentivising clinical shifts in EOC to increase clinical capacity.
 - Additional recurrent funding has been made available and will be used to support the implementation of NHS Pathways.
 - EOC average call answer time of 4 seconds, this shows less variability which reflects the strong staffing.
 - Integrated Urgent Care (IUC) performance is extremely good with 97% of calls answered within 60 seconds during August.
 - Uniform for IUC staff is now in place with feedback being positive.
 - The Category 2 mean response time improved further in August to 26 minutes and 11 seconds resulting in a year-to-date position of 28 minutes and 29 seconds.
 - New double crew ambulances (DCAs) are being delivered in line with the converter's refreshed plan which is helping to mitigate the vehicle off road (VOR) rates.
- 12.3 Lowlights were:
- Performance in September is significantly challenging resulting in Category 2 response times of 33 minutes against a plan of 28 minutes.
 - Turnover continues to be higher than plan for both EOC and IUC.
 - Recruitment into Clinical Assessor roles continues to be challenging within EOC.
 - Significant variation remains in response times to patients across Yorkshire and within each ICB area.
 - Handover delays continue to significantly impact on our ability to respond in a timely manner.
 - There is no funding for Manchester Arena Inquiry (MAI) Business Case and the recommended actions.

- 12.4 Anne Cooper sought assurance regarding the Patient Transport Service (PTS) overspend against budget being 12% over activity compared to 2023/24 and whether our commissioners are fully aware. Nick Smith confirmed this has been raised with the Integrated Care Boards (ICBs) along with the Executive Leadership Board (ELB) members.
- 12.5 Jeremy Pease thanked colleagues in Fleet for their continued support and hard work on the delivery of new vehicles.
- 12.6 Martin Havenhand sought assurance on how the Trust has addressed the agency overspend. Nick Smith advised that the Trust has seen a reduction in agency spend and is recruiting to more substantive roles. The Trust is hoping to see an improvement within IUC as this is where the highest turnover of staff remains.
- 12.7 **Resolved**
The Board noted the report.

BoD24/07/13 **Emergency Preparedness Resilience and Response (EPRR) Core Standards**

- 13.1 Nick Smith presented the EPRR Core Standards report in addition to the annual EPRR report that was presented at Board in July 2024.
- 13.2 The key highlights were:
- The provisional Trust self-assessment, following the challenging process, has resulted in an overall assessment of 93.1% compliant compared to 71% last year. Nick Smith recognised the hard work from the Operations team for the overall assessment which is now substantially compliant.
 - The final submission to the West Yorkshire ICB for the self-assessment is 31 October 2024.
 - A deep dive will also be carried out in 2024/25 focussing on cyber security.
- 13.3 Anne Cooper gave assurance that the Quality Committee continue to meet quarterly and have seen the progression and detailed evidence as described in the paper. However, Nick Smith noted that some areas of partial compliance relate to the MAI. There could be a potential risk as no funds for MAI are available, however Operations will keep track of any progress. Marc Thomas explained that there is a national piece of work looking at the core standards and the ability to meet the MAI actions.
- 13.4 **Resolved**
The Board noted the report.

BoD24/07/14 **Finance Report**

- 14.1 Kathryn Vause presented the Financial Performance Report. The Trust's financial position at month 5 (31 August 2024) was reported as follows:
- The Trust is reporting a year to date (YTD) position of £206k deficit against a planned surplus of £268k, an adverse variance of £475k.
 - The forecast position is break-even; however this includes significant risk due to unachieved efficiency targets.
 - YTD the Trust has exceeded the agency cap by £1.3m.

- The Trust has an adverse variance against the efficiency plan; YTD £2.83m and forecast £7.46m.
- For capital:
 - Purchased assets: YTD expenditure is behind plan due to delayed delivery of DCAs.
 - Leased assets: there has been no capitalised lease expenditure to date, which is in line with plan.
 - Efficiencies: The Trust is behind plan in meeting the efficiencies target, both year-to-date and forecast.
- A specific cost pressure has emerged in relation to a HMRC compliance issue which will be rectified retrospectively. The estimated cost of rectifying this issue is c. £1m and this is included in the forecast at month 5. The Trust are taking actions to mitigate this risk.
- The Trust assumed the pay award would be 2%, however 5.5% was agreed. This will create a pressure This will affect ambulance services in particular as they employ more agenda for change staff.
- Although the Trust is facing a more financially challenged position there **is** more work to do culturally, however Kathryn Vause provided assurance to the Board that the Trust will achieve a financial position of break-even.

14.2 Martin Havenhand emphasised that we are in the sixth month of the financial year and there is significant pressure for the Trust to deliver to our approved financial plan. This risk needs to be mitigated and addressed with all budget holders.

14.3 Anne Cooper sought assurance regarding the managerial culture and Peter Reading assured the Board that the Executive Team are fully aware and this is being addressed.

14.4 **Resolved**
The Board noted the report.

BoD24/07/15 **Quality Committee Chair's Report**

15.1 Anne Cooper, in her capacity as Chair of the Quality Committee, presented the Quality Committee Highlight Report from the meetings held on 18 July and 17 September 2024.

15.2 The key points raised were:

- The management of controlled drugs is an ongoing issue; however we are making progress with our compliance and legal procedures.
- Health and Safety Training is critical for leaders in operations and the planned training should be supported.
- Issues regarding capacity constraints within the Health and Safety team. An update on 18 September was given and the Trust are exploring how this risk can be mitigated.

15.3 Adam Layland advised that there is work being done regarding management of controlled drugs. Martin Havenhand also mentioned that his visit with the leadership team for the South Yorkshire system included conversations with the Consultant Paramedic and Head of Operations in respect of this matter.

- 15.4 Martin Havenhand commented that it had been suggested that a forum be held to discuss how this could be resolved. Sam Robinson also expressed her interest to support this forum due to the involvement of the personal issue devices and App technology.
- 15.5 **To discuss and address the management of controlled drugs and report back to Board with the support from Nick Smith, Dave Green and Sam Robinson.**
(ACTION: Julian Mark)
- 15.6 **Resolved**
The Board noted the report.
- BoD24/07/16 **Quality and Clinical Highlight Report**
- 16.1 Dave Green presented the quality sections of the Quality and Clinical highlight report, drawing attention to the following highlights:
- A revised uniform policy has been agreed at Clinical Governance Group that stipulates 'bare below the elbow' for all staff that are patient facing or working in or around vehicles.
 - The Trust Public Health Analyst has reviewed the demographics relating to patient feedback and has identified that the Trust receives a larger proportion of feedback from patients who live in the least deprived areas of Yorkshire and Humber.
 - The post of Associate Director of Quality Improvement has been approved and has been advertised with 29 applications received.
 - Clinical supervision continues and 480 staff members have now been trained with a further 200 planned for October.
- 16.2 Jeevan Gill raised an issue of the bare below elbow for Sikh colleagues. Dave Green confirmed the IPC team can address these.
- 16.3 The lowlights were:
- Through August there has been an increase in the number of Category 2 patients that have waited more than 80 minutes for an ambulance.
 - Julian Mark and Dave Green will be reviewing and addressing the above.
- 16.4 Adam Layland reported that a consultation will be carried out to review excessive Category 2 response times and what potential harm is being caused to patients with long delays. In addition this work will review whether call categorisation is correct.
- 16.5 Tim Gilpin suggested that some patients do have life threatening conditions and are not being placed in the correct category. Dave Green confirmed 60% of our patients are not being transported to hospital, although some historical culture continues to take patients to the emergency departments.
- 16.6 To ensure the right services go to the right patients, **Dave Green will liaise with Julia Nixon, Associate Chief Operating Officer, to provide assurance to the Board in respect of any changes to categorisation.**
(ACTION: Dave Green)

16.7	Anne Cooper reiterated we need to encourage a professional workforce. and how to behave and not to just follow processes. Tim Gilpin agreed to include controlled drugs in the People Committee forward plan for future discussions. (ACTION: Mandy Wilcock)
16.8	Julian Mark presented the clinical sections of the Quality and Clinical highlight report, drawing attention to the following points: <ul style="list-style-type: none"> Two cross-organisational workshops were held to determine our organisational priorities for 2025/26 for reducing health inequalities. The discussions focussed on areas in which the Trust can make a tangible difference to the access, experience and outcomes of those patients and members of our communities that experience health inequalities. The role of the Trust in impacting on the social determinants of health was also considered. The outputs of the discussions will be fed into the upcoming business planning discussions. No substantive funding has been identified for public health analytical resource which poses a risk to the reducing health inequalities programme moving forward.
16.9	Resolved The Board noted the report.
BoD24/07/17	Research Strategy 2024-27
17.1	Fiona Bell delivered a presentation on the achievements of the YAS Research function and the next steps for the Trust to maintain and develop its prominence as a leader in ambulance-sector research.
17.2	The vision for 2027 is for increased opportunities for ambulance staff, patients and communities to participate in high quality research that improves the out-of-hospital emergency, urgent and non-emergency care we provide. Our ambition for 2027 is setting the direction, being a trusted institute and creating impact.
17.3	Jeremy Pease asked if there were any challenges regarding funding at University level. Ruth Crabtree, Public Health Lead is engaging with all ICBs and is collating evidence on how this is impacting on our patients.
17.4	Martin Havenhand sought assurance that the work done by the Research function is linked with the Trust strategy.
17.5	Resolved The Board accepted assurance that the YAS research strategy supports the Trust strategy and will ensure YAS is research active and has evidence from research to inform decision-making.
BoD24/07/18	People Committee Chair's Report
18.1	Tim Gilpin, in his capacity as Chair of the People Committee, presented the People Committee Highlight Report arising from the meeting held on 10 September 2024.
18.2	The key points discussed were:

	<ul style="list-style-type: none"> The non-compliance with the national minimum wage for some staff with salary sacrifice agreements should be noted as an alert and was discussed at length by the Committee.
18.3	<p>Resolved</p> <p>The Board noted the report.</p>
BoD24/07/19	<p>People and Organisational Development Highlight Report</p>
19.1	<p>Mandy Wilcock presented the People and Organisational Development highlight report, drawing attention to the following key points:</p> <ul style="list-style-type: none"> Sexual Safety Charter continues to improve sexual safety of our staff and the number of cases being reported. A Professional Standards Panel meets weekly to bring together key stakeholders and to provide a consistent approach for all cases. Specific training with solicitors and legal advisers involved with sexual cases provides us with a much better oversight. Employment checks for student paramedics – the contract with NHS England mandates the Trust carry out their own employment checks, however the Trust has relied on those undertaken by the Universities. The Trust received the Gold TIDE award, in recognition of the Trust's commitment to diversity and inclusion. TIDE (Talent Inclusion and Diversity Evaluation). This award shows great progression from Silver in 2023 and Bronze in 2022. The Trust was rated #23, an improvement on #36 in 2023 and the third highest rated NHS Trust (5 English Ambulance Trusts were in the Top 100).
19.2	<p>Anne Cooper sought clarity regarding the money invested into improving the culture of the organisation and whether the Board will receive any updates. Mandy Wilcock advised a quarterly report will be produced for Board on specific progress on People First and national requirements.</p>
19.3	<p>A discussion was held regarding improving sickness absence. There are several actions with all service areas in particular staff are contacted immediately when off sick in order to support the return-to-work interviews.</p>
19.4	<p>Rebecca Randell queried what happens after the contracts end for the Australian paramedics. This is a standard 3-year contract, and a substantive contract could be available on completion.</p>
19.5	<p>Martin Havenhand expressed his concerns that only 76% of senior leaders have completed their PDRs. All Executives must provide a list of leaders who have not had their PDRs (and the reasons why) at the next Board.</p> <p style="text-align: right;">(ACTION: Mandy Wilcock / All)</p>
19.6	<p>Resolved</p> <p>The Board noted the report.</p>
BoD24/07/20	<p>Winter Strategic Approach</p>
20.1	<p>Nick Smith presented the Winter Strategic Approach with the following key points:</p> <ul style="list-style-type: none"> This plan has been presented at various committees/groups for discussion and agreement and is now recommended for Board approval. The tactical plan is live and updated regularly and will be shared with partners to develop and support their plans.

20.2	Anne Cooper sought assurance regarding the wellbeing of staff and patients during points of pressure and excessive delays where there are no drinks available. Nick Smith assured the Board this will be overseen by the Corporate Cell and will be built into the plan.
20.3	Marc Thomas suggested the Trust consider moving away from having a Winter Plan and replace with an Annual Plan to stop differentiating between winter as pressures are all year round. This will be considered in our Business Planning next year for 2025-26.
20.4	Rebecca Randell questioned the hospital handovers in the tactical plan, and the key milestones for hospital handovers. Nick Smith advised there is significant work being done with other ambulance services to gain consistency across the region.
20.5	Adam Layland also confirmed conversations with partners have continued but it is dependent upon each individual acute trust and their own actions.
20.6	<p>Resolved</p> <p>The Board reviewed and approved the Winter Strategic Approach covering the Autumn/Winter period from October 2024 to March 2025.</p> <p>The Board reviewed and approved the Winter Tactical Plan for 2024/25.</p>
BoD24/07/21	Corporate Governance Report
21.1	<p>David O'Brien presented the Corporate Governance report and highlighted four key points:</p> <ul style="list-style-type: none"> • Recruitment campaign for Non-Executive Directors and Associate Non-Executive Directors to commence November 2024. • The Trust has produced a guidance booklet to help staff prepare for a potential CQC inspection. • During the next three months there will be three internal audit reviews that relate to aspects of Board governance. These are: <ul style="list-style-type: none"> ○ Board Assurance Framework ○ Compliance with the Fit and Proper Person Test ○ Compliance with the NHS Code of Governance • Following the EPRR report, Cyber Security training is scheduled for the Board Development Session in October in person.
21.2	<p>Resolved</p> <p>The Board noted the developments in Board governance outlined in this report.</p>
BoD24/07/22	Development Programme – Equality, Diversity and Inclusion
22.1	David O'Brien presented the Board-level development programme covering Diversity in Health and Care.
22.2	The programme is delivered via a series of events for Board members and other leaders. Attendance at each module is initially limited to three places for each trust. Attendees are expected to include the Trust's EDI lead, a

representative of the Trust's staff networks, and a Board member. The same Board member does not need to attend all sessions. Martin Havenhand and Andrew Chang have attended the first module in the programme.

22.3 **Resolved**

The Board noted the Trust's participation in the Diversity in Health and Care programme for 2024/25

BoD24/07/23 **Any Other Business**

23.1 Medical Responsible Officer Statement of Compliance Annual Board Report.

23.2 Dr Julian Mark presented the report, the key points were:

- The statement is to be signed off and submitted to NHSE by 30 October 2024.
- Nurse and Midwifery Council (NMC) have advised all medical appraisals to align with acute trusts – a new medical appraisal policy (currently in draft) is to be signed off.

23.3 **Resolved**

The Board reviewed the content of this report and confirmed the organisation is compliant with The Medical Profession (Responsible Officers) Regulations 2010 (as amended in 2013).

BoD24/07/24 **Risks**

27.1 No additional risks were raised for inclusion on the risk register or the Board Assurance Framework.

BoD24/07/24 **Date and Time of Next Meeting**

24.1 The next meeting is scheduled to take place on Thursday 28 November 2024.

The meeting closed at 1236 hrs.

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

_____ **CHAIRMAN**

_____ **DATE**