

**MEETING OF THE COUNCIL OF GOVERNORS
HELD AT 16:00 HOURS ON THURSDAY 27 OCTOBER 2016
IN THE SEMINAR ROOM, AIREDALE GENERAL HOSPITAL, SKIPTON ROAD, STEETON,
KEIGHLEY**

PRESENT

Professor Michael Luger (Chairman)
Mr Peter Beaumont, Public Governor, Wharfedale
Mrs Margaret Berry, Public Governor, South Craven
Mr John Bootland, Public Governor, Keighley Central
Mr Martin Carr, Public Governor, Craven
Mr David Child, Public Governor, Bingley
Mrs Linda Dobson, Public Governor, Keighley East
Mr Peter Jackson, Public Governor, Rest of England
Mrs Christine Johnson, Public Governor, Skipton
Mrs Val Kimberley, Public Governor, West Craven
Mrs Anne Medley, Public Governor, Keighley West (Lead Governor)
Mr David Pearson, Public Governor, South Craven
Mr John Roberts, Public Governor, Worth Valley
Ms Pat Taylor, Public Governor, Settle and Mid Craven
Mr Bryan Thompson, Public Governor, Ilkley
Mrs Pauline Sharp, Bradford Metropolitan District Council
Mr Jerry Stanford, Public Governor, Pendle East and Colne
Mr Mike Yates, Staff Governor, Registered Volunteers
Mrs Rachel Binks, Staff Governor, Nurses and Midwives
Dr Tom Hollins, Staff Governor, Doctors and Dentists
Mr Ben Grange, Staff Governor, Allied Health Professionals and Scientists
Ms Madi Hoskins, Staff Governor, All other staff

BOARD DIRECTORS

Miss Bridget Fletcher, Chief Executive
Mr Karl Mainprize, Medical Director
Mr Andrew Copley, Director of Finance
Ms Stacey Hunter, Chief Operating Officer
Mr Nick Parker, Director of Human Resources
Mr Andrew Gold, Non-Executive Director
Mr Jeremy Cross, Non-Executive Director
Mr Shazad Sarwar, Non-Executive Director
Dr Maggie Helliwell, Non-Executive Director

IN ATTENDANCE

Mrs Jane Downes, Company Secretary
Mrs Fiona Page, Membership Manager
Ms Karen Walker, Interim Deputy Director of Nursing
Mrs Sharon Katema, Assistant Company Secretary

APOLOGIES FOR ABSENCE

Mr Peter Allen, Public Governor, Skipton
Mr Paul Maskell, Public Governor, West Craven
Mrs Pat Thorpe, Public Governor, Bingley Rural
Cllr Wendy Hull, Stakeholder Governor, Craven District Council
Cllr Ken Hartley, Stakeholder Governor, Pendle Borough Council
Cllr Robert Heseltine, Stakeholder Governor, North Yorkshire County Council
Mrs Naz Kazmi, Keighley Voluntary Services
Ms Helen Bourner, Director of Strategy and Partnerships
Ms Jill Asbury Interim Director of Nursing

50/16 OPENING MATTERS

Professor Michael Luger welcomed everyone to the Council of Governors meeting and set the context of the meeting. He informed the Governors that as two stakeholder governors had given their apologies; item 11 on the agenda would be circulated for approval by email.

51/16 DECLARATION OF INTERESTS

There were no declarations of interests.

52/16 MEMBER'S QUESTIONS

There were no members' questions.

53/16 MINUTES OF THE COUNCIL OF GOVERNORS MEETINGS

The minutes of the Annual Members Meeting held on 28 July and the Council of Governor's meeting held on 28 July and 22 August 2016 were approved as a correct record.

54/16 MATTERS ARISING NOT COVERED ELSEWHERE ON THE AGENDA

Members Questions (minute ref Item 36/16)

Following a request for the Board's comment on the lack of car parking spaces and subsequent action to issue a press release and progress updates in the Members Newsletter, the Governors were informed that this has now been completed.

55/16 CHAIRMAN'S REPORT

In presenting his report to the Governors, the Chairman outlined the themes which had been referenced in the Chief Executive's reports to the Board of Directors and the Network meeting. He added that the unprecedented pressure remains an area of concern and changes such as collaborative working with other trusts and governors were required. He highlighted that Bridget Fletcher had stated the increased focus on providing better care within the region through working collaboratively with partners in WYAAT and WYSTP.

With regards to sustainability, Michael Luger informed the governors that it was important that changes were implemented and this was becoming apparent right across the Trust. He added that externally things were gaining momentum and cited the change in government and the challenges the country faced regarding an ageing population as factors which have an impact on the NHS. Michael Luger commended the creativity and hard work and adaptability shown by members of staff stating that they constantly explore new ways of working.

The Chief Executive's Report was taken as read.

Bridget Fletcher highlighted that this quarter had seen the greatest change in terms of announcements, national developments and consultations which had been relayed to staff in team briefings and in monthly board updates. She drew the Council's attention to the following key documents:

National Developments

➤ **Submission of Two-Year Operational Plan**

Bridget Fletcher informed the Governors that there had been changes to the annual operational plan as all NHS organisations were now required to submit a two-year operational plan by December 2016. The impact of this reduction was that the timeline for discussing and agreeing the Trust's Annual Plan had also changed in order to meet this new submission deadline date.

➤ **Sustainability and Transformation Plan (STP) Guidance**

The STP Finance submission was submitted on 16 September 2016 after further guidance had been received in August from NHS Improvement and NHS England.

Local Health Economy Developments

Bridget Fletcher drew attention to the following key developments

- New Models of Care
- Cessation of transformation funding allocated directly to Vanguard sites
- STP plans 2016-2021

Bridget Fletcher stated that throughout Quarter 2 directors have continued to work on developing and strengthening partnerships with key stakeholders across the local and wider West Yorkshire health and care economies. This included building better relationships with local GP practices, groups of practices and Primary Care Federations, local providers, the local authority and providers across the West Yorkshire Acute Alliance.

She informed the Council that there Bradford City and Bradford Districts Clinical Commissioning Groups had announced that their intention to consult on a new commissioning strategy for primary medical care. The engagement work ran from 5 September to 14 October 2016.

Bridget Fletcher highlighted that following NHS Improvement's analysis of the Trust's Q1 submissions, the Trust's Governance Risk Rating was Green but had failed to meet the 4hour A&E standard. NHSI had noted that with the exception of Q3, The Trust had met the 4 hour target in all quarters in 2014/15, and the Trust's performance remains one of the highest within the region. She assured the Council that her focus was on doing the right thing locally for the local population and apologised to all patients who had been affected.

Right Care Portfolio of Programmes

Bridget Fletcher informed the Council that the Board receives monthly updates on the progress of the Right Care Portfolio of Programmes. She added that plans to develop the new £6m Acute Assessment Unit which will be next to Trust's Emergency Department, were underway. It was hoped that the location of this Unit would ease workforce pressures allowing staff to work together more efficiently across several disciplines, as well as providing better short stay facilities and reduce the number of patients admitted unnecessarily.

Bridget Fletcher stated that the Board had also reflected on learning from the patient stories that had been presented to the Board between September 2015 and March 2016.

Pauline Sharp enquired if non-executive directors were assured that feedback from Patient Stories was followed through.

The non-executive directors present responded that they were assured that progress was being made and any complex issues were escalated. They informed the Council that there was a bi-annual process in place which allowed the Board to review these cases and extract the learning from them and where progress was lacking they would hold people to account. With regards to the individual case cited by Pauline Sharp, Anne Gregory added that that particular Patient story had been raised at a Buddy Group Meeting and this was progressing. Michael Luger surmised that all patient stories were anecdotes aimed at generating questions and finding out ways to improve the service offered to patients.

(i) Quality and Safety Report

Bridget Fletcher presented the Q1 Quality and Safety Report which was taken as read. She stated that the report sought to provide assurance that risks were being managed appropriately and highlight areas of concern for escalation. The report was scrutinised quarterly by the Board and monthly updates provided in between.

The following key issues recorded this quarter were highlighted:

- The publication of the CQC inspection rating with the Trust receiving a summary rating of 'requires improvement'
- A decrease from 27 to 18 complaints this quarter as compare to the preceding reporting period
- 4 recorded cases of CDifficile this quarter which is consistent with the equivalent reporting period
- A reduction in the number of recorded falls, medication and pressure ulcer incident reports
- The SHMI ratio for the period January to December 2015 is 0.91, compares favourably with the national average and is banded within expected (2)
- The publication of the National Inpatient Survey in June 2016

The Council received and noted the report.

(ii) Financial Position

Bridget Fletcher presented the Finance and Performance Reports which were taken as read. She outlined the overall position at the end of September.

The following key points were noted:

- The Trust had shown a surplus of £2,464k which is £146k worse than plan. In 2016/17 the Trust is also subject to achieving a control total with NHSI. With regards to action being taken, the Groups have signed up to delivering a recovery plan which will improve the position and the Executives are exploring options to drive improvements in the financial position;
- The financial position was significantly affected by the number of beds that remain open due to delayed discharges and this is also impacting on the amount of elective activity that the Trust is able to do and payment by results ('PbR') income is now £1.3m behind plan;
- This current position leaves the Trust at significant risk of not delivering the control total if the underlying pressures continue.

David Child asked if the non-executive directors were assured that actions are now in place to stabilise the deficit.

Jeremy Cross responded that as non-executive directors they were aware of the financial pressures. He added that over the last three months they were looking at cost when compared to income as well as the impact of the delayed transfer of care on elective surgery. They were also aware of the impact caused by the delayed transfer of care with regards to winter beds staying open longer than planned for. He concluded that a detailed report showing plans to stabilise the deficit had been presented at the Board meeting and as non-executive directors they were assured that steps were being taken to address the deficit.

David Child stated that he was concerned that the problem of bed-blocking was not reflected in the papers. He asked if there was a way to stop this recurring. Stacey Hunter responded that whilst the Board had looked at ways of mitigating this, external factors such as the inability to discharge patients had an impact. She added that it was anticipated that the Sustainability and Transformation Plans (STP) would help address this problem.

The non-executive directors agreed that they were assured risks were being appropriately managed without compromising on quality and safety and that everything possible was being done to address this.

Performance Standards

Bridget Fletcher stated that the NHS Improvement Risk Assessment Framework for Quarter 2 was Amber due to the Emergency Care standard and RTT standard not achieving the target.

She added that following receipt of further details from NHS Improvement regarding the Sustainability and Transformation Funding, it was anticipated that having achieved the requirements for Quarter 1 and the majority of requirements for Quarter 2 there would be a need to review the forecast for the remainder of the year each month going forward. The new Single Oversight Framework which replaces the Risk Assessment Framework was implemented from 1st October 2016.

John Bootland asked if there non-executive directors were sufficiently assured that plans were in place to cope with any upsurge of demand for beds during winter. Stacey Hunter responded that plans were in place and an additional ward would be opened to alleviate any surges in capacity. However, financing this across the system was the limiting factor.

(iii) CQC Improvement Plan

Bridget Fletcher referred to the CQC final inspection report which had been received by the Trust in July. She added that actions within the plan had now either been delivered on or track to deliver and the responsible

The CQC made a number of recommendations in the final inspection report. The Trust has responded to the 28 “must do” recommendations within the report. Appendix 4 details actions in place that will deliver the CQC recommendations. All the actions within the plan are either delivered or on track to deliver and all responsible persons are held accountable for the delivery of the improvements.

The actions are the responsibility of the Clinical Groups and Corporate departments to deliver and it is fundamentally important there is evidence of completion along with assurance of ongoing compliance. Therefore to this aim, the Board Assurance Sub-Committee chaired by a Non-Executive Director will continue to meet on a monthly basis monitor progress by exception.

The Chief Executive's Report was received and noted.

Jerry Stanford queried if the non-executive directors had received any feedback following the setting up of the CQC Assurance subcommittee. Shazad Sarwar responded that all non-executive directors on the sub-committee have access to, and are able to view each bit of the organisation plan.

John Roberts stated that CQC Action Point 19 had found staffing levels to be inappropriate. He queried if non-executive directors were assured that this was being addressed. Shazad Sarwar respond that the Board received reports around staffing and are assured that plans were in place to improve this. He highlighted that it was important to note that staffing was a national problem and the Trust is in a far better position to continue delivering a safe service.

Discussions were held regarding staffing and the plans in place to increase staffing levels.

57/16 Annual Plan 2017/18 – 2018/19

Council of Governors Feedback Report

Michael Luger led the Council in thanking Anne Medley the outgoing lead Governor stating that there was an increase in the positive relationship between the Board and the Governors.

Anne Medley presented the Council of Governors Feedback Report which was taken as read. She highlighted a wide range of events that the governors had held including drop in sessions before each Focus event, open days, events at local colleges, other community events, and via direct contact with governors. She added that governors also engaged with members and the public via a quarterly newsletter and bi-annual updates, the Trust website and social media.

The report was received and noted.

58/16 THE COMPANY SECRETARY'S REPORT

Jane Downes presented the Company Secretary's Report which was taken as read.

2017 Schedule of meeting dates

Jane Downes drew attention to the change in the Council to Board meeting dates which will now be held from 12 to 2pm. The Governors received the 2017 Schedule of Meeting dates and agreed with the proposed meeting dates and times.

Appointment of Lead and Deputy Lead Governor

The Governors were asked to ratify the appointment of David Pearson and Peter Jackson as Lead and Deputy Lead Governor respectively for a term of one year.

Review of the Constitution

The Governors were informed that the revised Constitution will be presented for approval at the January 2017 Governors meeting. The governors received and noted the progress update.

Airedale Hospital Open Day

The Governors were informed that following on from the success of the Open Day held on 17 August 2016, the next hospital Open Day will be held on Wednesday 16 August 2017 from 12noon to 4pm.

Governor Training and Development

Jane Downes thanked the governors for having attended the Governor training day which was facilitated by NHS Providers adding that the results were evident throughout the meeting.

Non-Executive Directors – Activity Reports

The reports from the Non-Executive Directors highlighting their quarterly schedule of activity were received and noted.

Forward Plan

The Council of Governors Forward plan and dates of the CoG meetings were received and noted.

59/16 Governor's Committee and Working Group Reports

The briefing on the activities of Governors from their respective committees / working groups were received and noted.

60/16 Appointments and Remuneration Committee Report

The report was noted.

61/16 Any Other Business

No other items of business were raised.

62/16 REVIEW AND CLOSE OF MEETING

There being no further business, the Chairman declared the meeting closed.

The next quarterly meeting of the Council of Governors will be held on 26 January 2017 in the Seminar Room, Airedale Hospital.