

**MEETING OF THE BOARD OF DIRECTORS
HELD AT 9.30AM ON WEDNESDAY 30 JANUARY 2019
AT AIREDALE GENERAL HOSPITAL, SKIPTON ROAD, STEETON, KEIGHLEY**

PRESENT: Mr Andrew Gold, Chair
Ms Jill Asbury, Director of Nursing
Mr Brendan Brown, Chief Executive
Mr Andrew Copley, Director of Finance
Mr Jeremy Cross, Non-Executive Director
Professor Anne Gregory, Non-Executive Director
Dr Maggie Helliwell, Non-Executive Director
Ms Stacey Hunter, Chief Operating Officer
Mr Mark Lam, Non-Executive Director
Mr Karl Mainprize, Medical Director
Mrs Lynn McCracken, Non-Executive Director

IN ATTENDANCE:
Mrs Stella Jackson, Head of Corporate Governance
Mr Nick Parker, Associate Director of HR and Workforce
Mr Stuart Shaw, Associate Director of Strategy, Planning & Partnerships
Mrs Cowan (item 3)

Also in attendance were staff members and Governor representatives.

01/19 DECLARATIONS OF INTEREST

There were no declarations of interest.

02/19 PATIENT STORY

This month's patient story was told by Mrs Cowan who spoke about her poor experience of care whilst visiting a relative on the Acute Assessment Unit (AAU).

During ensuing discussion, the following key points were made:

- Mrs Cowan's story highlighted that the Trust's response to her complaint around standards of care was not managed appropriately;
- It was important that the organisation embraced learning from issues such as this. In particular, consideration should be given to developing an additional 'Pride of Airedale' award category to encourage people to celebrate improvements made following the identification of an issue impacting on patient care. **Action: Associate Director of Human Resources and Workforce to consider;** and
- The outcome of the Board discussion should be shared more widely. **Action: Director of Nursing to oversee.**

03/19 MINUTES

The minutes of the Board meeting held on 28 November 2018 were approved as a correct record.

04/19 MATTERS ARISING NOT COVERED ELSEWHERE ON THE AGENDA

- 276/18: Patient Safety Review Q2 2018/19 – it was reported the outcome from the 'true for us' report would be shared at March Board. **Action: Head of Corporate Governance to add this item to the workplan.**

There were no other matters arising not covered elsewhere on the agenda.

05/18 BOARD ACTION LOG

The Board action log was reviewed and those actions deemed completed agreed for closure.

06/19 CHAIR'S BRIEFING

The Chair's briefing was received and noted.

07/19 REPORT OF THE CHIEF EXECUTIVE

Mr Brown presented the Report of the Chief Executive and highlighted the following key points:

- The King's Fund had produced a useful summary of the NHS Long Term Plan and the Trust would be comparing the Plan with its own Strategy. Further information on the Workforce Strategy in association with the Plan, and the Green Paper on Social Care were awaited;
- It was anticipated the CQC inspection report would be received in the near future; this item would be scheduled for discussion at the March Board of Directors meeting. **Action: Head of Corporate Governance to add to the work programme;**
- A West Yorkshire Association of Acute Trusts (WYAAT) Committee in Common meeting had occurred the previous day and a number of items arising from that meeting would be considered by the Board during the Private Board meeting;
- Mr Aitchison had been offered (and accepted) the role of Chief Operating Officer and would take up post on 1 April. Mr Brown thanked Ms Hunter for agreeing to undertake the lead for the acute provider collaboration work with Bradford Teaching Hospitals, effective from 1 April.

Mr Brown then introduced the 'Right Care Portfolio Programme' report and informed the Board significant progress had been made in all programme areas. In particular, the flu programme CQUIN had been achieved. Consideration was currently being given to how to effectively report around some of the value programmes and progress against the Strategy.

During ensuing discussion, the following key points were made:

- AGH Solutions leaders would be entitled to take part in the Right Care Leaders programme;
- The Trust had been asked to encourage Board members to complete a follow-up 'Investors in Diversity' benchmarking survey, the results from which would be

compared with the findings of the initial survey. **Action: Board members to complete;**

- The paper contained a requirement that the Board support a change in practice to digital ways of working through all clinical and administrative groups and areas. The Finance, Performance and Digital Committee had requested that the Digital Strategy (and its implications on the workforce and estate) be considered at a future Board Strategy day. **Action: Chair/Chief Executive to timetable into the Board Strategy work programme;** and
- The breadth of the 'Right Care Programme' report required review in order to make it more meaningful to Board members. **Action: Chief Executive to provide feedback to the Head of Organisational Learning and Improvement.**

The Board noted the Chief Executive and Right Care Portfolio Programme reports.

08/19 INTEGRATED GOVERNANCE REPORT

The Chair outlined the importance of performance reports being considered at Committee meetings and any exceptions identified at those meetings highlighted to the Board. However, on this occasion, some reports had not received Committee consideration due to a timing issue; those reports had, therefore, been forwarded to the Board meeting for full consideration.

Mr Copley then presented the Integrated Governance Dashboard Report for December 2018 and reiterated key points in the paper.

During discussion, the following key points were made:

- The People Committee had discussed some of the people related issues outlined within the report and had heard that 'healthy and engaged' performance was good despite the pressures faced by staff. It was believed work around engagement, alongside the location, pace and size of the hospital had contributed to the good performance. It was believed the sickness absence performance was reflective of the pressures felt by staff and it was noted that mandatory training performance had improved;
- There had been a dip in business development and commerciality performance and it was envisaged this was a seasonal issue. The Commercial Strategy would be developed, following approval of the Trust's overall strategy. **Action: Associate Director of Strategy, Planning and Partnerships;**
- The Bed Occupancy data for children was incorrectly RAG rated and would be corrected for the next iteration of the report. **Action: Associate Director of Strategy, Planning and Partnerships;**
- The number of patients with a length of stay over 21 days had reduced but was still higher than the national target. Thirty of those patients were based on Ward 10 where patients were expected to be an inpatient for more than 21 days. A number of other patients that were occupying beds for longer than this period were inpatients on the Stroke pathway. The Trust had highlighted these challenges to NHS Improvement and requested this be reflected within the bed occupancy metrics;
- It was important that the Trust's indicators reflected system-wide metrics. **Action: Associate Director of Strategy, Planning and Partnerships to incorporate into the refreshed dashboard;**
- Whilst winter planning had occurred, the winter cycle had begun earlier than anticipated and this had impacted on performance. The income for December had also reduced but there had not been a corresponding drop in bed occupancy levels. It was anticipated the performance data for January 2019 would be similar to that recorded for December 2018;

- The summary of overall performance should in future focus on: quality and safety, finance, performance and people mirroring the revised Board sub-committee structure, effective from 1 January 2019. **Action: Associate Director of Strategy, Planning and Partnerships to update the dashboard for April 2019;** and
- Consideration should be given to incorporating information into the dashboard regarding the business plan forecast of expected outcomes to compare to the actual outturns. **Action: EDG to consider.**

Trust Board noted the Integrated Governance Report.

09/19 FINANCE REPORT

Mr Copley presented the Finance Report for the period ended 31 December 2018, and highlighted the following key points:

- The month 9 underlying consolidated position was a deficit of £2,423k which was £183k better than plan. However, attainment of the year-end Control Total would be challenging; and
- The Cost Improvement Programme (CIP) had overachieved at month 9 and whilst cash levels were below plan, receipts from CCGs were expected in January 2019.

Trust Board noted the Finance Report.

10/19 EXECUTIVE PERFORMANCE REPORT

Mr Copley presented the Executive Performance Report for the period ended 31 December 2018 and reiterated the key points contained within the paper.

Mr Brown reported WYAAT had produced a system-wide performance report. However, an agreement had not yet been reached regarding ways in which Integrated Care System providers would hold one-another to account. The Board considered the Trust's performance against constitutional standards within the context of the wider West Yorkshire and Harrogate performance dashboard.

Trust Board noted the Executive Performance Report.

11/19 PATIENT SAFETY SCORECARD REPORT

The Medical Director presented the Patient Safety Scorecard Report to 31 December 2018 which had been considered at the January Quality and Safety Committee meeting. An increase in prescribing errors had been observed and the situation would be monitored by the Quality and Safety Committee.

Trust Board noted the Patient Safety Scorecard Report.

12/19 MONTHLY NURSING AND MIDWIFERY STAFFING REPORT

The Director of Nursing presented the report and reiterated key points regarding the move of ward 6 to ward 2.

Mr Parker noted an increased level of acuity had been experienced over the Christmas period and queried whether the Board should be taking action to acknowledge and address

workforce resilience. In response, Ms Asbury outlined the importance of the Board acknowledging the hard work of staff in delivering front line care during challenging times. **Action: Chief Executive to incorporate an acknowledgement into the CEO Report.** Mr Mainprize outlined the importance of bureaucracy being minimised in order to free up staff time to care and Ms Asbury believed the Integrated Care Record would assist with this. Ms McCracken queried whether older people could be targeted to undertake apprenticeships. In response, Ms Asbury reported apprenticeships were targeted at all age groups and staff were encouraged to consider 'retire and return' opportunities. The Trust and Bradford Teaching Hospitals NHS Foundation Trust (BTHFT) were also exploring an opportunity to develop a programme aimed at attracting and retaining newly qualified students. The first cohort of trainee nursing associates had completed their training and this achievement had been acknowledged through celebration events. A letter of acknowledgement would also be sent to the graduates. **Action: Director of Nursing to oversee.**

Trust Board noted the monthly Nursing and Midwifery Staffing report.

13/19 MORTALITY SCORECARD REPORT

The Medical Director introduced the Mortality Scorecard to December 2018.

Trust Board noted the Mortality Scorecard.

14/19 EMERGENCY CARE STANDARD EXCEPTION REPORT

The Chief Operating Officer reported increased demand and bed occupancy levels had impacted on performance levels. It was anticipated demand would continue at current levels until mid/late February. The performance issues being experienced by the Trust were not dissimilar to those experienced by other trusts.

Mr Lam noted the Trust's ranking (detailed within the table on page 4 of the report) had dropped during December and queried the reason for this. In response, Ms Hunter reported the Trust had experienced noravirus and those trusts situated outside Bradford and Airedale had not had a similar experience. Additionally, resource shortages during the month impacted on the speed at which additional beds could be allocated.

Trust Board:

- **Apologised to the patients and families affected by the speed at which additional beds were opened and to those who had not been seen with the four hour emergency care standard;**
- **Thanked the staff for working hard to deal with the winter pressures; and**
- **Noted the Emergency Care Standard Exception Report.**

15/19 FAILURE TO DELIVER THE NON FAST-TRACK BREAST MAXIMUM WAIT OF 2 WEEKS FOR NON-CANCER BREAST PATIENTS IN DECEMBER 2018 AND QUARTER 3

The Chief Operating Officer presented an exception report regarding the failure to deliver the 2 week standard (referral to hospital appointment) to patients referred to the non fast-track (NTF) breast pathway. Ten breaches were unavoidable and related to patient choice. The remaining two breaches were due to insufficient clinical capacity.

Trust Board agreed the Trust should:

- **Engage with the Primary Care GP Cancer Lead to agree a process for those**

patients choosing to defer their fast-track outpatient appointment beyond 2 weeks; and

- Liaise with the West Yorkshire and Harrogate Cancer Alliance and, where appropriate, consider any initiatives aimed at streamlining patient pathways.

16/19 WRITTEN REPORTS FROM SUB-COMMITTEE CHAIRS

Audit and Risk Committee Report of Meeting Held on 22 January 2019

Mr Lam introduced the report and informed Board members two significant assurance reports had been received for two internal audits. The importance of filing the Annual Accounts on time had been highlighted to the External Auditor. The Chair queried whether the Internal Auditors should be asked to undertake a 'culture' audit, given the key messages arising from the patient story. Mr Parker and Mr Cross did not believe an audit approach would be the best way to assess culture and suggested that other methodology should be considered.

Finance, Digital and Performance Report of Meeting Held on 22 January 2019

The Finance, Digital and Performance report from the meeting held on 22 January 2019 was taken as read.

People Committee Report of Meeting Held on 23 January 2019

Ms McCracken introduced the report and requested that the Board approve the additional changes to the terms of reference as recommended by the Committee and outlined within the report. The amendments were agreed. **Action: Head of Corporate Governance to amend the terms of reference.**

Quality and Safety Committee Report of Meeting Held on 23 January 2019

Dr Helliwell reported the Committee had considered the relationship of the Committee with other committees and groups and had been assured reporting lines would prove effective.

Charitable Funds Report to January 2019

The report outlined charitable fund activities undertaken during the month.

The Chair thanked the Committee Chairs for their support in ensuring the committees functioned effectively.

None of the sub-committees highlighted any issues for escalation to the Board of Directors.

Trust Board noted the Committee reports.

17/19 ANNUAL WORK PROGRAMME

The Head of Corporate Governance introduced the refreshed work programme and invited Directors to contact her should they wish to add/remove any items.

The Associate Director of Strategy, Planning and Partnerships noted a number of Governance items had been omitted and agreed to forward details to Mrs Jackson. **Action: Associate Director of Strategy, Planning and Partnerships.**

Trust Board noted the Annual Work Programme.

18/19 ENVIRONMENTAL COMMITMENT STATEMENT

The Chair introduced a paper regarding the Environmental Commitment Statement. Mr Parker believed the statement should be broadened to highlight the Trust's commitment to inclusion. **Action: Associate Director of Human Resources and Workforce to forward suggested wording to the Chair.**

Trust Board approved the Environmental Commitment Statement, subject to the Trust's commitment to inclusion being incorporated within it.

19/19 ANY OTHER BUSINESS

Freedom to Speak Up

Ms McCracken (the FTSU Non-Executive Director) reported that following a review of national FTSU reports, the FTSU policy would be amended in recognition of National Guardian policy which recommended that staff be invited to contact the FTSU NED. **Action: Associate Director of Human Resources and Workforce to ensure the policy is amended.**

Fracture Neck of Femur

The Medical Director reported the Trust was no longer an outlier for fracture neck of femur mortality and the latest performance was recorded at 7.5%.

Volunteering

The Director of Nursing reported the Trust had been awarded £65,000 over two years to support its volunteering activities and monies would be utilised to support the youth volunteering programme.

There were no other items of business and the meeting concluded at 11.55 pm.

20/19 REVIEW AND CLOSE OF MEETING

The review of the Public and Private Board meetings would take place following the Private Board meeting.

The next meeting of the Board of Directors would be held at 9.30am on Wednesday 27 March 2019 in the Seminar Room, Airedale General Hospital.

**Public Trust Board Meeting
30 January 2019**

ACTIONS

Ref:	Actions Requested	Timescale	Progress
244/18	Director of Nursing to organise a 'meet the board' session with the new cohort of registered nurses.	March Board	
269/18	<u>Patient Story: Exclusively Inclusive</u> Director of Nursing to: <ul style="list-style-type: none"> • Arrange for the Communications Manager to provide a progress update on the website development; and • Invite organisation members to participate in the Trust's patient experience work. 	March 2019 March 2019	
269/18	Director of Nursing to arrange for a Patient Experience Trends analysis report to be produced on a six monthly basis.	1 May 2019	
274/18(ii)	Chief Operating Officer to present an update report regarding the Single Stroke Service.	March 2019 Board	
282/18	Medical Director to present the key findings from the Guardian of Safe Working report.	March 2019	
249/18(i)	<u>NHS Code of Governance</u> Group Company Secretary to advise the Board of changes required to governance documents following the publication of the revised Code of Governance	tbc	
275/18	<u>Quality and Safety Reporting</u> Director of Nursing/Medical Director/Professor Gregory to discuss how progress against action plans can be measured and reported.	tbc	
30/1/19-1	<u>Patient Story</u> Associate Director of Human Resources and Workforce to determine the feasibility of adding an additional category to the 'Pride of Airedale' awards regarding improvements made to patient care following learning undertaken. Director of Nursing to share the outcome of the Board discussion with the AAU team.	March 2019 February 2019	

30/1/19-5	<u>Monthly Nursing And Midwifery Staffing Report</u> Chief Executive to incorporate an acknowledgement into the CEO e-communication regarding the hard work of staff in delivering front line care during the challenging winter period. Director of Nursing to send a letter of congratulations to the first Nurse Associate cohort.	February 2019 February 2019	Completed
30/1/19-6	<u>Written Reports From Sub-Committee Chairs</u> Head of Corporate Governance to amend the People Committee terms of reference to reflect discussion at the Board meeting.	February 2019	Completed
30/1/19-7	<u>Annual Work Programme</u> Associate Director of Strategy, Planning and Partnerships to inform the Head of Corporate Governance which additional governance items need adding to the work programme.	February 2019	Completed and added to the work programme
30/1/19-8	<u>Environmental Commitment Statement</u> Associate Director of Human Resources and Workforce to forward to the Chair suggested wording regarding the Trust's commitment to inclusion - for incorporating into the Environmental Commitment Statement.	February 2019	
31/1/19-9	<u>Any Other Business</u> Associate Director of Human Resources and Workforce to ensure the FTSU policy is amended to reflect National Guardian policy which recommended that staff be invited to contact the FTSU NED.	March 2019	