

**MEETING OF THE BOARD OF DIRECTORS
HELD AT 9.30AM ON WEDNESDAY 31 JULY 2019
AT AIREDALE GENERAL HOSPITAL, SKIPTON ROAD, STEETON, KEIGHLEY**

PRESENT: Andrew Gold, Chair
Rob Aitchison, Chief Operating Officer
Jill Asbury, Director of Nursing
Brendan Brown, Chief Executive
Andrew Copley, Director of Finance
Jeremy Cross, Non-Executive Director
Rhys Davies, Non-Executive Director
Andrew Dumbleton, Non-Executive Director
Maggie Helliwell (MHe), Non-Executive Director
Melanie Hudson, Non-Executive Director
Karl Mainprize, Medical Director
Nadira Mirza, Non-Executive Director

IN ATTENDANCE:

Meg Crossley, A&E Consultant and Responsible Officer (items 13-15)
Jo Farn, Interim Head of People and Organisational Development
Stella Jackson, Head of Corporate Governance (minute taker)
Victoria Pickles, Associate Director of Corporate Affairs
Amanda Stanford, Associate Director of Quality and Safety
Amy Whitaker, Deputy Director of Finance

APOLOGIES: Lynn McCracken, Non-Executive Director
Stuart Shaw, Associate Director of Strategy, Planning & Partnerships

Also in attendance was a Governor of the Trust.

110/19 WELCOME

The Chair welcomed everyone to the meeting, including the recently appointed Non-Executive Director (AD), Deputy Director of Finance and Interim Head of People and Organisational Development.

111/19 DECLARATIONS OF INTEREST

There were no declarations of interest.

112/19 PATIENT STORY

This month's patient story had been cancelled due to a late and unforeseen change in the patient's circumstances.

113/19 MINUTES OF THE BOARD MEETING HELD ON 26 JUNE 2019

The minutes of the Board meeting held on 26 June 2019 were approved as a correct record of the meeting.

114/19 MATTERS ARISING NOT COVERED ELSEWHERE ON THE AGENDA

Actions

- 29/5/19-1: Patient Story – issues identified regarding the ward ethos would be addressed through leadership work taking place on the ward. Admission and discharge packs were being developed;
- 29/5/19-6: Annual Report and Accounts – a Board meeting to approve the Annual Report and Accounts would be incorporated into the 2020 meeting schedule once the submission dates had been released, a provisional date had been agreed in the interim;
- 26/6/19-4: Patient Experience Trends Analysis – the trend analysis data had been incorporated into the National Inpatient Survey report which would be considered during the meeting; and
- 26/6/19-5: Patient Experience Trends Analysis – the Quality and Safety Committee would be considering the preferred format of future Patient Experience Trends Analysis papers at the September Committee meeting.

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

115/19 CHAIR'S BRIEFING

The Chair's briefing was taken as read. Non-Executive Directors asked whether any good practice was gleaned from the Chair's attendance at Harrogate and District NHS Foundation Trust's Annual Members' Meeting. In response, the Chair reported he had shared his observations with the Associate Director of Corporate Affairs and Head of Corporate Governance. One area of good practice had been to invite key stakeholders to the event and the Trust would look to do similar. Another had been to produce a summary version of the Annual Report and consideration would be given to producing a summary of the Trust's 2019/20 report.

The Board noted the Chair's briefing.

116/19 REPORT OF THE CHIEF EXECUTIVE

The Chief Executive presented the Report of the Chief Executive and informed Board members:

- Adam Brimelow, Director of Communications, NHS Providers, had visited the Trust in July to gain an understanding of areas of good practice and challenges faced by the Trust. Some of his interviews with staff had been included in a podcast which had been shared with the Board. A Non-Executive Director asked whether Adam had informed the Trust about good practice nurse staffing solutions. In response, the Chief Executive reported that whilst Mr Brimelow had highlighted a number of solutions, these had already been tried and tested by the Trust;
- Key areas of focus for the NHS, following Boris Johnson's appointment as Prime Minister, were: finance; and Accident and Emergency, Referral to Treatment (RTT) and Cancer wait times;
- Junior doctors had voted in favour of a proposed contract deal and new terms would be introduced from August 2019 for doctors in training. The impact of this would be monitored by the People Committee; and

- The Trust had held its Employee Open Day and Annual Members' Meeting (AMM) on 19 July. This initiative had resulted in more people attending the AMM than the previous year. The Board thanked the organisers of both events. The Chair believed it appropriate that consideration be given to utilising other Trust events to attract new candidates and retain existing ones.

RD informed Board members the Chief Information Officer would be leaving NHS England. He then referred to the Long Term Plan information contained in the Chief Executive's report and asked whether the Trust would be making a digital submission. In response, the Chief Executive reported the submission would be made at system level and regular updates would be provided through the Director of Strategy reports.

The Board noted the Chief Executive's report.

117/19 WRITTEN REPORTS FROM SUB-COMMITTEE CHAIRS

Audit and Risk Committee, 23 July 2019

The report was taken as read. The Chair of the Committee informed Board members the meeting had noted the positive feedback on the Annual Audit Letter from Grant Thornton and had concluded meetings of Committee Chairs should be scheduled to take place immediately prior to the Audit and Risk Committee meetings.

Finance, Performance and Digital Committee, 23 July 2019

The report was taken as read. The Chair of the Committee informed Board members the Committee had received some excellent presentations regarding performance and in particular around delivery of the A&E 4 hour standard and the RTT standard. The Director of Nursing noted a reference within the report to one case of C-diff being reported as avoidable and pointed out it had been classed as unavoidable. **Action: Head of Corporate Governance to correct the paper and arrange for the correct version to be uploaded to the website.**

People Committee, 24 July 2019

The report was taken as read. The Committee Chair reported feedback from the Junior Doctors survey had flagged up a number of issues. Non-Executive Directors:

- Referred to the information contained within the report which highlighted the impact the pension regulations were having on consultants (and ultimately patients) and considered it important that this matter receive Board attention. The Chair agreed to add an item regarding this matter to the Private Board meeting agenda; and
- Queried whether staff were incentivised to complete appraisals. In response, the Interim Head of People and Organisational Development reported that whilst the appraisal return rates were low, it was envisaged these reflected the time of year and would increase in September.

Quality and Safety Committee , 24 July 2019

The report was taken as read. The Chair of the Committee added changes to the Committee terms of reference had been agreed at the meeting (not highlighted within the report) and had been forwarded to the Board meeting for ratification. Additionally, the Committee had discussed an issue regarding the timely extraction of data – this was essential in order to aid the Committee's decision-making discussions – and a review of current and possible practice would be completed. The CQC Improvement Plan would be considered during the Private Board meeting.

Trust Board noted the Committee reports.

118/19 INTEGRATED GOVERNANCE REPORT

The Director of Finance introduced the report, which measured performance against a range of objectives and performance indicators, based on key milestones in the Annual Plan or external frameworks. He highlighted the following key points:

- The Trust's financial performance was better than plan;
- The overall position showed operational performance remained under continued pressure and whilst RTT was currently being achieved, it was recognised this performance could deteriorate due to capacity issues;
- Work was being undertaken at system level to deal with the waiting list challenges faced;
- Theatre utilisation was below plan in June (this was being impacted upon by the current consultant pension challenges). The Chair asked whether other Trusts could be offered use of the theatre space during non-activity periods. The Director of Finance reported this matter was being considered at system level. A Non-Executive Director outlined the importance of the Trust's reporting regarding theatre utilisation highlighting under and over-utilisation (numbers and percentages) in order for a true picture to be gained regarding the level of activity being generated; and
- The Integrated Performance Report contained a number of Statistical Process Control Charts (SPC Charts) which outlined performance over a longer time period. A Non-Executive Director asked when the Board would receive SPC Charts for all areas of performance. In response, the Medical Director reported the Trust was currently exploring what tools were available to assist the Trust in producing these. The Chair believed it appropriate that the Board discuss and receive training regarding the charts and the Chief Executive outlined the importance of the chart format and content enabling quality Board discussions. Board members highlighted the importance of the charts containing narrative regarding the trends and plans to address performance issues. **Action: Chair/Chief Executive/Associate Director of Corporate Affairs to timetable discussion and training regarding the charts.**

The Chair noted a reference within the paper to the medical vacancy situation being reviewed and queried when the Board would receive an update on action being taken to address the situation. In response, the Medical Director reported a paper would be forwarded to the September Board. **Action: Head of Corporate Governance to ensure this has been timetabled into the work programme.**

Trust Board noted the Integrated Performance Report.

FINANCE REPORT

The Deputy Director of Finance introduced the finance report which provided an overview of the financial position, key areas of risk, Cost Improvement Programme (CIP) position and forecast as at 30 June 2019. The underlying position was a deficit of £273k which was £289k better than plan. The current position did not include future overtrading income from the Clinical Commission Group which was expected.

Trust Board noted the financial report.

119/19 NURSING AND MIDWIFERY STAFFING REPORT

The Director of Nursing introduced the monthly report and highlighted the following key points:

- There were 52 Registered Nurse (RN) vacancies and it was anticipated 32 of these places would be filled through recruitment activities being undertaken. Nurse Associates were able to pick up bank shifts in order to support RN gaps and those wards that had been utilising the Associates were benefitting from these. An agency had been identified to support International Recruitment activities and recruitment was likely to start in September;
- Midwifery ratios were back in range at 1:29;
- 'Stay' interviews had been conducted at the Employee Open Day. Early analysis of the findings revealed staff remained at the Trust due to lifestyle benefits and the position of the Trust in the community;
- There had been more leavers than starters in the period April to June 2019; this was typical for this time of the year; and
- The nurse vacancy rate remained below 10% and the Trust moved staff around wards where appropriate. However, such an action could prove detrimental should staff not wish to work on the wards allocated to them.

A Non-Executive Director noted 50% of the staffing in Cardiology in June had been through the provision of bank and agency staff and queried whether this was within the normal range. In response, the Director of Nursing reported that the ward contained escalation beds and temporary staffing was being utilised to respond to escalation bed demand. She added that the Trust was undertaking a piece of work on its bed base. The Chief Operating Officer outlined the importance of the Trust's bed base plans being communicated to staff. He also pointed out the need for the Trust to develop an understanding of its annual establishment in order to plan its recruitment activities accordingly. A Non-Executive Director queried whether the current level of unfilled shifts presented any high risk challenges. In response, the Chief Operating Officer reported this situation did present high risks and effective ward leadership was key to mitigating these. Additionally, it was important that the Trust effectively managed its patient flow in order to reduce demand on escalation beds where possible. The Director of Nursing added increased length of stay times within elective and non-elective were also having a knock-on effect on bed base demand. The Chair highlighted the importance of the narrative within the paper correlating with the graphs and charts. **Action: Director of Nursing to review and correct the anomalies.**

A Non-Executive Director noted the average RN/midwives fill rate was 63.5% on Ward 18 (Trauma and Orthopaedics) during the day and asked when the Board would receive an escalation report regarding this performance. In response, the Director of Nursing reported the fill rate was for Elective Orthopaedic activity where there were, on a number of occasions, only four or five patients on the ward; consequently staff were moved to work in busier areas of the hospital. The Non-Executive Director believed that the inclusion of narrative to this effect should be incorporated into future reports. The Chief Executive considered it more appropriate that reports regarding nurse (and medical) staffing enabled the Board to focus its attention on quality and safety issues. He believed the Board needed to have a discussion about effective analysis of the numbers. The Director of Nursing added some of the Trust's systems did not currently provide contextual reasons for issues and the Trust was working with its SystemOne supplier to ensure quality data could be extracted from the system. The Board requested that the Quality and Safety Committee Chair and the Director of Nursing meet to discuss the required content of future reports to the Quality and Safety Committee and Trust Board. A Non-Executive Director highlighted the importance of the reports containing output measures/data. The Chief Executive asked that the quality of the narrative within the reports be reviewed as not all outputs would be immediately realisable. The Chair believed it appropriate that training be given to staff regarding the effective use and analysis of data. **Action: Quality and Safety Committee Chair/Director of Nursing to discuss the**

proposed content of future reports.

The Medical Director then highlighted the importance of the Trust focussing its efforts on becoming an employer of choice in order to address the nurse and doctor vacancy issue. The Director of Finance added that the Trust must work closely with Primary Care to reduce unnecessary demand on the hospital; such a move would reduce the number of doctors and nurses required by the Trust.

Trust Board noted the monthly Nursing and Midwifery Staffing report.

120/19 CQC NATIONAL INPATIENT SURVEY 2019

The Director of Nursing introduced the report which described the Inpatient Survey scores for 2018 at a trust, regional and national level.

During consideration of the report, the Chair of the Quality and Safety Committee reported the full action plan would be considered by the Committee in September. The Chief Executive believed consideration should be given to ways in which to encourage staff to put themselves into the patients'/carers' shoes when delivering care. The Director of Nursing considered this could be achieved through the sharing of more patient stories at ward level and the Chief Executive outlined the importance of encouraging this approach at an early stage through Induction.

Action: Interim Head of People and Organisational Development to review the material used at Induction.

The Interim Head of People and Organisational Development believed patients/carers should be invited to attend and speak at appropriate staff engagement events. The Director of Nursing concurred but outlined the importance of inspirational stories being shared. Non-Executive Directors considered it appropriate that patients and carers be invited to feed back their experiences in a timely manner and highlighted the importance of the right questions being asked in order to gain valuable and meaningful feedback. The Director of Nursing reported that whilst the Inpatient Survey questions could not be changed, the Trust gathered feedback from a range of areas using a variety of tools and the results had been shared with the Board through the Patient Experience paper.

A Non-Executive Director asked whether the Trust had considered how volunteers/carers might provide support with the delivery of less complex tasks. In response, the Director of Nursing reported volunteers supported mealtime duties and the Trust had secured funding to further develop its volunteering activities. The Non-Executive Director believed the Apprenticeship levy could also be utilised by the Trust to support such activities.

Trust Board noted the:

- **Completed full action plan would be considered by the Quality and Safety Committee in September; and**
- **CQC National Inpatient Survey results.**

121/19 APPROACH TO WINTER PLANNING

The Chief Operating Officer introduced the previously circulated presentation slides which:

- Set the context to winter planning;
- Contained a number of planning assumptions;
- Highlighted the current core and escalation bed base;
- Provided details regarding the Urgent Care/Flow Improvement programme;
- Contained current planning information; and

- Highlighted a number of next steps.

The Chief Operating Officer reported the plan would be monitored by the Finance, Performance and Digital Committee. **Action: Head of Corporate Governance to incorporate into the FP&D work plan.**

The Director of Finance pointed out the importance of the Trust sharing its good practice/learning at system level. In response, the Chief Operating Officer reported he had met with his opposite number at Bradford Teaching Hospitals NHS Foundation Trust.

A Non-Executive Director asked whether the plan had been costed. In response, the Chief Operating Officer reported it had and system-level funds would be utilised to support the plan.

A Non-Executive Director reported she had been informed Australia was experiencing a flu epidemic and asked whether any plans were in train for this reaching the UK. In response, the Chief Operating Officer reported all staff would be encouraged to have a flu vaccination and the Trust would need to plan how to respond to this. The Non-Executive Director queried: i) whether the Trust would have sufficient resource to deal with such an epidemic; and ii) whether the Trust worked with the Ambulance service to deter inappropriate admissions from being made. The Chief Operating Officer reported the Trust would work closely with the service. The Chief Executive highlighted the importance of the Trust taking a steer from Public Health regarding the epidemic and of developing a communications strategy which aimed to deter people from attending hospital unnecessarily. The Director of Nursing reported the Trust would commence its flu vaccination programme as soon as the vaccines were received. The Board would receive its vaccinations at the September Board. **Action: Director of Nursing to organise.**

The Chair referred to the Urgent Care/Patient Flow slide and queried what steps were being taken to deter people from coming to the hospital. In response, the Chief Operating Officer reported it was likely a temporary Project Lead would be appointed to work across the system in managing demand. The Chair outlined the importance of staff being informed of such an appointment and of steps being taken to manage patient flow.

A Non-Executive Director queried whether the plan differed from the previous years. In response, the Chief Operating Officer reported some elements of the plan were the same but the difference this year would be in ensuring bed provision was available outside the hospital.

Trust Board noted and supported the approach to preparing for peak demand during Winter 2019/20.

122/19 COMPANY SECRETARY'S REPORT

The Associate Director of Corporate Affairs introduced the report which contained: i) the Fit and Proper Person Register; ii) the Quality and Safety Committee Terms of Reference; iii) the proposed Board/Committee timetable for 2020; and iv) the Board work programme. She highlighted that whilst no meetings were timetabled for August, the Integrated Performance Report would be shared with Board members.

Trust Board:

- **Noted the Fit and Proper Person (FPP) Self-Declaration Register;**
- **Agreed the scope of the FPP Test should be broadened to include: all members of the Board, senior staff in attendance at the Board, those with significant influence in reporting information to the Board and those members of staff who deputised for a Board member;**
- **Approved the proposed changes to the Quality and Safety Committee terms of**

reference;

- **Approved the revised Board and Committee meeting schedule; and**
- **Noted the Board work programme.**

123/19 RESPONSIBLE OFFICER ANNUAL BOARD REPORT AND STATEMENT OF COMPLIANCE

The Responsible Officer introduced the report which provided an overview of the Trust's recruitment, performance revalidation and appraisal process in relation to medical staff working at the Trust, as required by NHS England. She highlighted the following key points:

- A new software system had been implemented to support the revalidation and appraisal process;
- 92.5% of doctors with prescribed connections with the Trust had undertaken their appraisal within the expected annual period. Those people that did not have a completed appraisal were on maternity or long-term sick leave;
- Appraiser resource was a risk to the Trust and the number of people willing to undertake this role had reduced due to the implications of the pension reforms. Innovative solutions to this issue were being developed in order to attract more people to become appraisers; and
- The action to develop robust processes for Responsible Officer references remained outstanding.

Trust Board:

- **Accepted the Medical Revalidation Responsible Officer Annual Report for 2018/19 (noting that it would be shared with NHS England);**
- **Continued to support the work of the Responsible Officer and APO Unit in maintaining a robust appraisal process at the Trust and ensuring that timely revalidation recommendations continued to be made for all doctors linked to the Trust;**
- **Approved the Statement of Compliance confirming that the Trust, as a designated body, was in compliance with the regulations; and**
- **Delegated authority to the Chair or Chief Executive to sign the Compliance statement on behalf of the Trust.**

124/19 INFORMATION GOVERNANCE 2018/19 ANNUAL REPORT

The report was taken as read. The Director of Finance added the Trust had seen a marginal improvement in IG mandatory training completion rates. However, there had been significant increases in data access requests. The Chair asked whether there was a root cause for this increase. In response, the Director of Finance reported digital rulings in 2018 appeared to have raised awareness regarding access to information and highlighted that with the new Act the ability to charge a fee for information had been removed.

The Board:

- **Noted the Annual Report and DPO addendum; and**
- **Was satisfied the DPO role was being effectively planned and discharged in order to provide the Board of Directors and Trust with the appropriate information and assurances regarding compliance with the General Data Protection Regulation and Data Protection Act 2018.**

125/19 EQUALITY AND DIVERSITY ANNUAL REPORT 2018-19, INCLUDING WORKFORCE RACE EQUALITY STANDARD: MARCH 2019 AND WORKFORCE DISABILITY EQUALITY STANDARD: MARCH 2019

The reports were taken as read. The Interim Head of People and Organisational Development added the Trust had self-assessed itself as 'developing' in terms of delivering its equality objectives. The Chair of the People Committee confirmed that the various reports had been forwarded to the Board as the People Committee meeting had been inquorate. However, Non-Executive Directors had given their input to these through various scrutiny activities.

A Non-Executive Director believed the Trust's activities could be more ambitious. In response, the Interim Head of People and Organisational Development reported a key issue faced by the Trust was a lack of capacity to implement the action plan. However, a peer review of the Trust's plan revealed the content was good but communication of the Trust's successes and activities could be improved. A Non-Executive Director asked what outputs were anticipated from the reciprocal mentoring programme. In response, the Interim Head of People and Organisational Development reported stories would be shared. The Chair highlighted the importance of confidences not being breached through such a process and considered it appropriate that the effectiveness of the reciprocal mentoring arrangements be reviewed in early 2020. **Action: Interim Head of People and Organisational Development to forward a report to Trust Board.**

Trust Board approved the contents of the report for publication on the Trust website.

126/19 ANY OTHER BUSINESS

Cultural Capital

A Non-Executive Director reported that Bradford would be submitting a bid to become UK City of Culture in 2025. and asked how the Trust might support the application. The Chief Executive considered it appropriate that the Bradford-wide approach be considered by the Health and Care Partnership Board. **Action: Chief Executive to request that this be considered by the Partnership Board.**

There were no other items of business and the meeting concluded at 12.00 noon.

127/19 REVIEW AND CLOSE OF MEETING

The Board believed they had paid particular attention to important areas of business – nurse staffing, patient experience and the winter plan. There had been a good reason for the patient story being postponed.

PUBLIC TRUST BOARD MEETING
Wednesday 31 July 2019

Note: Actions will remain on the log for one meeting post completion. Actions to be brought to a future Board of Directors meeting will be added to the work plan.

ACTION LOG

Red	Amber	Green	Blue
Overdue	Going forward	This meeting	Complete

DATE DISCUSSED	AGENDA ITEM AND ACTION	LEAD	CURRENT POSITION	DUE DATE	STATUS	DATE ACTIONED & CLOSED
24/9/18 (1)	<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	VP	Expected to be released late summer	TBC		
30/1/19 (4)	<u>Integrated Governance Report</u> Associate Director of Strategy, Planning and Partnerships to develop the draft Commercial Strategy following approval of the Trust Strategy.	SS	To be produced following agreement of the Trust Strategy which is currently scheduled for October 2019. Draft Strategy to be available for November Board.	May 2019 June Sept 2019 Board Nov 2019 Board		
	Associate Director of Strategy, Planning and Partnerships to take the following comments into account when producing the next iteration of the dashboard: - Trust indicators to reflect system-wide metrics; and - The summary of overall performance to focus on: quality and safety, finance, performance and people.	SS	IPR refreshed to take account of comments received. A further review to take place in September 2019. Update: Review in progress. Updates to be reflected in October 2019 Integrated Performance Report	June Sept 2019 Board October 2019 Bard		

2/5/19-2	<u>Company Secretary's Report</u> Associate Director of Corporate Affairs to incorporate information into the 2019/20 Modern Slavery Statement regarding steps taken by the Trust to safeguard those patients identified as possible Modern Slavery victims.	VP	Complete – first draft of statement saved in the file for next year which incorporates this wording	May 2020		August 2019
29/5/19-1	<u>Patient Story</u> Director of Nursing to: <ul style="list-style-type: none"> Oversee a review of the wards ethos around caring; and Determine the feasibility of providing patients with welcome and discharge packs. 	JA JA	Leadership of the wards is being reviewed. Admission and discharge packs being produced	July 2019 July 2019		31/7/19 31/7/19
29/5/19-2	<u>Report of the Chief Executive</u> Chief Executive to incorporate an update within the Chief Executive report regarding the effectiveness of the Leadership Programme and proposed next steps.	BB		Nov 2019		
29/5/19-4	<u>Integrated Governance Report</u> Chief Operating Officer/Associate Director of Strategy, Planning and Partnerships to review the bed occupancy and escalation bed metrics and narratives when reviewing the dashboard	RA/SS	Being completed as part of the review in progress noted at 30/1/19 (4). Updated to be reflected in October 2019 Integrated Performance Report	August Sept Oct 2019 Board		
29/5/19-6	<u>Annual Reports and Accounts</u> Associate Director of Corporate Affairs to ensure a Board meeting to approve the annual reports and accounts is incorporated into the 2020 meeting schedule prior to the report submission day.	VP	Complete – board meeting schedule for 2020 approved at public board on 31.7.19 including provisional meeting for the annual report and accounts	July 2019		31/7/19
26/6/19-2	<u>Report of the Chief Executive</u> Associate Director of Corporate Affairs/Head of Corporate Governance/Lead Governor to consider how Governors might work more closely/effectively with the Trust to obtain feedback from the community about the Trust's services.	VP/SJ/ JS	To incorporate into the revised Engagement Strategy	Sept Oct 2019		

26/6/19-4	<u>Patient Experience Trends Analysis</u> Director of Nursing to incorporate trend analysis data into future reports – to enable the Board to determine whether or not the action taken as a result of feedback received has been effective.	JA	Content of the report to be considered by the Quality and Safety Committee	July 2019		
26/6/19-5	<u>Patient Experience Trends Analysis</u> Quality and Safety Committee to consider the format of future Patient Trend Analysis papers	JA		July Sept 2019		
26/6/19-6	<u>Emergency Planning Annual Report</u> Chief Operating Officer to organise a command and control table top exercise for all Board members.	RA		August 2019		
26/6/19-8	Associate Director of Corporate Affairs to incorporate into the Well-led brief consideration of the regularity and format of Committee Chair meetings.	VP	Complete – draft brief document incorporates this requirement	Sept 2019		August 2019
31/7/19-1	<u>Written Reports from Sub-Committee Chairs</u> Head of Corporate Governance to i) correct the reference to an avoidable C-diff case within the Finance, Performance and Digital Committee Chair paper; and ii) arrange for the correct version to be uploaded to the website.	SJ		August 2019		5/8/19
31/7/19-2	<u>Integrated Governance Report</u> Chair/Chief Executive/Associate Director of Corporate Affairs to timetable Board discussion and training regarding the content of the SPS Charts.	AG/BB/ VP		Sept 2019		
31/7/19-3	<u>Integrated Governance Report</u> Head of Corporate Governance to ensure a Medical Staffing paper is timetabled into the work programme for September 2019.	SJ	To be discussed at the September 2019 Board meeting.	August 2019		1/8/19
31/7/19-4	<u>Nursing and Midwifery Staffing Report</u> Director of Nursing to ensure all narrative within the reports correlates with the graphs.	JA		Sept 2019		
31/7/19-5	<u>Nursing and Midwifery Staffing Report</u> Quality and Safety Committee Chair/Director of Nursing to discuss the required content of future reports.	JA/MH		August 2019		

31/7/19-6	<u>CQC National Inpatient Survey 2019</u> Interim Head of People and Organisational Development to review the material used at Induction to ensure there's a focus on staff putting themselves in the shoes of the patient/carer.	JF	Completed – Cleveland Clinic video utilised to provide the patient perspective	August 2019		7/8/19
31/7/19-7	<u>Approach To Winter Planning</u> Head of Corporate Governance to timetable consideration/monitoring of the Winer plan into the FP&D work plan.	SJ		August 2019		5/8/19
31/7/19-8	<u>Approach To Winter Planning</u> Director of Nursing to arrange for the Board to receive flu vaccinations at September Board.	JA	Completed	25/9/19		
31/7/19-9	<u>Equality and Diversity Annual Report 2018-19, including Workforce Race Equality Standard: March 2019 and Workforce Disability Equality Standard: March 2019</u> Interim Head of People and Organisational Development to forward a report to Trust Board early in 2020 regarding the effectiveness of the reciprocal mentoring arrangements.	JF		March 2020		
31/7/19-10	<u>Any Other Business</u> Chief Executive to request that the Health and Care Partnership Board consider how partners might support the application for Bradford to become the culture capital of the country.	BB	Raised at the ICB Board in August 2019.	Sept 2019		August 2019