

**MEETING OF THE BOARD OF DIRECTORS
HELD AT 9.30AM ON WEDNESDAY 25 SEPTEMBER 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
Jo Harrison, Director of People and Organisational Development
Maggie Helliwell (MHe), Non-Executive Director
Melanie Hudson, Non-Executive Director
Lynn McCracken, Non-Executive Director
Karl Mainprize, Medical Director

IN ATTENDANCE:
Jo Farn, Interim Head of People and Organisational Development
Stella Jackson, Head of Corporate Governance (minute taker)
Victoria Pickles, Associate Director of Corporate Affairs
Stuart Shaw, Associate Director of Strategy, Planning & Partnerships
Amanda Stanford, Associate Director of Quality and Safety
Amy Whitaker, Deputy Director of Finance

APOLOGIES: Nadira Mirza, Non-Executive Director

Also in attendance were members of staff and a Governor of the Trust.
A patient and her husband attended for the patient story at item 3.

128/19 WELCOME

The Chair welcomed everyone to the meeting, including the recently appointed Director of People and Organisational Development.

129/19 DECLARATIONS OF INTEREST

There were no declarations of interest.

130/19 PATIENT STORY

This month's patient story was about Mrs A, who suffered from epilepsy. Whilst in recovery, following a surgical day case procedure, Mrs A had a seizure. Mrs A said the Recovery Nurses were excellent but neither her husband nor her carer had been able to join her in Recovery. Had they been able to, they could have provided valuable input regarding her needs due to their knowledge and experience of Mrs A's seizures. Following discussions with Mr and Mrs A regarding this issue, the Surgical team had introduced pagers into theatres to enable family members/carers of patients with particular needs to be contacted when the

patient came out of theatre. Those family members/carers would be given the opportunity to support the Recovery process.

During ensuing discussion and in response to questions asked by Board members, the following key points were highlighted:

- The story demonstrated the importance of all colleagues listening to those people that had lived experience of a patient's condition;
- The learning from the story would be shared across the Trust. Steps would also be taken to share it with partners across the system as it was likely other providers would patients and carers who had had similar experiences. **Action: Associate Director of Quality and Safety/Director of Nursing to agree how to share the story;** and
- Poor communication and poor attitudes were key contributors to any poor patient experience. The Director of Nurse committed to ensuring these issues were addressed.

The Board thanked Mr and Mrs A for sharing their story and apologised for the issues they experienced.

131/19 MINUTES OF THE BOARD MEETING HELD ON 31 JULY 2019

The minutes of the Board meeting held on 31 July 2019 were approved as a correct record of the meeting.

132/19 MATTERS ARISING NOT COVERED ELSEWHERE ON THE AGENDA

Actions

- 26/6/19-5: Patient Experience Trends Analysis – The Quality and Safety Committee had considered the format of future Patient Trend Analysis papers;
- 26/6/19-6: Emergency Planning Annual Report – a date was being identified to undertake a command and control table top exercise for all Board members; and
- 31/7/19-4: Nursing and Midwifery Staffing Report – steps had been taken to ensure all the narrative within the report correlated with the graphs.

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

133/19 CHAIR'S BRIEFING

The Chair's briefing was taken as read.

The Board noted the Chair's briefing.

134/19 REPORT OF THE CHIEF EXECUTIVE

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

- Political uncertainty continued at national level and the Board would be discussing the Trust's Brexit preparations during its Private meeting;
- Meetings with local MPs had taken place to consider the real issues facing the Trust (including the significant estate challenges) and the wider NHS;

- Adam Brimelow had expressed an interest in working with the Trust on capital spend matters;
- The Chair and Chief Executive had attended a new learning network for trusts operating in a rural environment. Participants at the event had acknowledged the positive aspects of working in smaller, rural hospitals. The Medical Director added the positive aspects attached to being 'small and rural' had proven positive to a hospital in Idaho which had promoted the benefits during its recruitment activities; all its staffing vacancies had subsequently been filled;
- The media had been reporting that this winter could be one of the coldest in 30 years.
- The Trust's self-assessment against the healthcare worker vaccination measures would be presented to October Board for consideration. The Director of Nursing had been appointed as the Trust Board Flu Champion;
- The Board would be considering, during its Private meeting, the impact of pension reforms on the Trust's consultant workforce; and
- The Trust was supporting World Patient Safety Day.

Board members referred to the leader of Bradford Council request that the Trust consider and adopt the IHRA definition of anti-semitism. All Board members remained committed to equality but did not consider it appropriate that the Trust adopt the definition as it did not fit with the Trust's values.

The Board noted the Chief Executive's report.

135/19 WRITTEN REPORTS FROM SUB-COMMITTEE CHAIRS

Charitable Funds Committee, 12 September 2019

The report and minutes were taken as read. The Chair queried whether the funds for Airedale NHS Theatres film and website; and the band 3 care co-ordinator were 'business as usual' activities. In response, the Associate Director of Corporate Affairs reported these activities were not 'business as usual' and could, therefore, be supported by use of Charitable Funds. The Chief Executive considered it important the Board receive a strategy paper regarding fundraising plans and initiatives. The Associate Director of Corporate Affairs reported such a paper would be considered by the Committee at its next meeting and forwarded to the Board following that meeting. **Action: Head of Corporate Governance to timetable this into the Committee and Board work programme.**

Finance, Performance and Digital Committee, 17 September 2019

The report was taken as read. LM noted the Committee had recognised the importance of digital business continuity plans being developed and asked when this work would be undertaken. In response, the Chair of the Committee reported short-term continuity plans were being developed as a matter of priority. The Chief Operating Officer added work was underway to ensure primary and secondary care providers could effectively access and share patient records through SystemOne. Currently, the system was not used in a consistent way across all providers and this issue was recorded on the Trust's Risk Register. The SystemOne supplier was aware of the issue and was considering how to address this. The Chair highlighted the importance of the Trust's back-up generator supporting the Trust's digital infrastructure should a power outage be experienced and the importance of regularly testing the generators. The Chief Executive considered it important that consideration be given to ways in which to bring the different business continuity processes together.

People Committee, 18 September 2019

The report was taken as read. JC reported a Mandatory Training Internal Audit report had revealed the Trust's mandatory training expectations were higher than other trusts and

queried whether the People Committee had reviewed this matter. In response, the Director of People and OD reported a national review of mandatory training requirements was being undertaken and the Trust's own activities would be considered following the conclusion of that review.

Quality and Safety Committee , 18 September 2019

The report was taken as read. The Director of Nursing reported the last paragraph under the 'Highlights from the meeting' section of the paper should have stated:

'The In-Patient Survey paper reviewed the outputs against the trends seen from previous patient feedback (as described in the recent Board paper) to understand any change/deviation from previous themes – they were consistent on this occasion'.

Trust Board noted the Committee reports.

136/19 INTEGRATED GOVERNANCE REPORT

The Associate Director of Strategy, Planning and Partnerships 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 KPIs within the report were being reviewed to ensure these aligned to the Annual Plan; and
- Operational and financial performance continued to be challenging.

The Chief Operating Officer added Emergency Department waiting time performance had reached 90% during the first three weeks of August. However, high operational demand had impacted on performance during the last week of the month with performance dropping to 81%. Performance had improved during September with the month to date performance showing 92.7%. The number of escalation beds open within the Trust had reduced to a level lower than that experienced for a considerable amount of time. A number of practical suggestions had also been made by the Operational team regarding ways in which to improve weekend discharge rates. Diagnostic performance had improved and steps were being taken to maintain this at around 95%. The Referral to Treatment standard had not been achieved for August and was unlikely to be achieved during September or October. The Cancer two week standard had not been met in August, primarily due to staffing pressures within Endoscopy, but the 62 day referral to treatment standard had been met. The Trust was an outlier in terms of its long stay performance and work was underway to reduce the length of stay by 0.5 days by March 2020. Multi-disciplinary team meetings were taking place on a daily basis to review length of stay cases. Board members supported the work underway to improve operational performance and requested that future Integrated Governance reports highlight both the underlying and actual performance picture. **Action: Associate Director of Strategy, Planning and Partnerships/Chief Operating Officer to progress.**

LM did not believe the spider diagram accurately reflected current workforce pressures. This section of the diagram was informed by the Pulse Survey metrics but the Pulse Survey had only been completed by 13% of the workforce and was not, therefore, a representative measure. Board members noted that the remainder of the report contained additional measures which were not reflected within the diagram and considered it appropriate that the metrics utilised to inform the spider diagram be reviewed. **Action: Director of People and OD/Associate Director of Strategy, Planning and Partnerships.** The Director of Finance believed that consideration should be given to capturing both local and system level issues within the report. **Action: Associate Director of Strategy, Planning and Partnerships to**

determine how these might be captured. RD believed the format of the report should be reviewed in order to enable Board members to navigate the content more easily and effectively. **Action: Associate Director of Strategy, Planning and Partnerships to determine how the content might be improved/streamlined.** The Chair pointed out the sub-committees scrutinised relevant areas of the report in greater detail and highlighted the importance of the Committee Chair report drawing to the attention of the Board any key issues discussed at committee level.

Trust Board noted the Integrated Performance Report.

FINANCE REPORT

The Deputy Director of Finance introduced the finance report and informed Board members:

- There was an underlying deficit position of £634k which was £276k better than plan. Work was underway to achieve a balanced position by the financial year end. However, it was not yet known how winter demand might impact on the plan; and
- The Cost Improvement Programme had over-achieved at month 5 and it was envisaged the year-end forecast position would be achieved.

Trust Board noted the financial report.

137/19 NURSING AND MIDWIFERY STAFFING REPORT

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

- Sickness absence, pressure ulcer formation and fall reduction performance was good;
- Ward 20 had been opened on fewer occasions during August;
- There were 61 Registered Nurse (RN) vacancies and initiatives were in train to recruit additional staff during the next few months; and
- The Trust had been successful in securing a place on the Pathway to Excellence programme. Information regarding the programme would be incorporated into the October Nursing and Midwifery Staffing Report. **Action: Director of Nursing.**

JC queried why there had been an increased number of Adverse Event Form (AEF) submissions from the Acute Assessment Unit (AAU). In response, the Director of Nursing informed Board members this was due to the level of vacancies within that department. However, those vacancies were now being filled. JC then queried whether the content of AEFs was of a sufficient high quality. In response, the Director of Nursing reported staff tended to describe the potential impact rather than the real impact of the situation through the forms. Consequently, work was underway to improve the quality of information reported. The Associate Director of Quality and Safety believed existing risks could be captured better through the forms and the Medical Director considered it appropriate that consideration be given to ways in which to effectively highlight the real (rather than perceived) impact of workforce shortages on patients. The Director of Nursing concurred and considered it appropriate that impacts rather than numbers be communicated to staff. Both the Medical Director and Director of Nursing highlighted the importance of the Trust investing in its nurses and midwives. The Associate Director of Quality and Strategy asked why the Trust did not benchmark as high as its median peers in Model Hospital data. In response, the Director of Nursing reported this was due to vacancy levels at the Trust.

Trust Board noted the monthly Nursing and Midwifery Staffing report.

138/19 **PROGRESS REPORT ON THE DEVELOPMENT OF THE ~~ANNUAL PLAN~~ FIVE YEAR PLAN**

The Associate Director of Strategy, Planning and Partnerships reported there was a requirement for the Trust to submit, during the month, its initial contribution to the West Yorkshire and Harrogate Integrated Care System (ICS) five year plan. Further submissions would be made in November, January and February. The Finance Director added further discussion about the planning process would take place during the Private Board meeting. The Deputy Director of Finance reported the Trust was awaiting formal notification of its 2020/21 control total and the Associate Director of Corporate Affairs informed Board members the control total would require agreement of the Board.

The Trust Board noted the Progress Report on the Development of the Five Year Plan.

139/19 **ANNUAL REPORTS**

The following annual reports were received and noted:

- Safeguarding
- Infection Control; and
- Guardian of Safe Working

Infection Control Annual Report

The Associate Director of Quality and Safety queried whether the Infection Control annual report followed a prescribed format. In response, the Director of Nursing reported the format, whilst not prescribed, was used by a number of trusts. The Associate Director of Quality and Safety noted the report contained a significant amount of data but did not describe the impact of work undertaken within the Trust and what action was taken to correct any areas of concern. In response to this comment, the Quality and Safety Committee Chair informed the Board the Committee was sighted on statistics which backed up the information contained within the report. However, she believed the Board summary/cover paper should have highlighted key points and assurances. **Action: Director of Nursing to ensure future reports capture this information.** The Chief Executive asked why the Trust's infection rate was lower than that in other trusts. In response, the Director of Nursing and Medical Director reported that any outbreaks within the Trust were quickly identified and isolated by colleagues.

Guardian of Safe Working Annual Report

The Medical Director introduced the report as the Guardian of Safe Working had been unable to attend the meeting. LM noted a request within the paper that the Board consider a commitment to expanding the two remaining 6 person rotas (Obstetrics & Gynaecology junior and surgery) to 7 person and believed the Board would require additional information prior to doing so. The Medical Director reported that since the report had been produced, the Executive Management Team had considered and approved the request. The Chief Operating Officer added that further work was required to ensure closer alignment between the information contained within the report and that held within divisional teams. The Chair outlined the importance of the Guardian of Safe Working attending Board meetings to present the papers and requested that the dates of future meetings be shared with him in advance. **Action: Medical Director to share the dates and request the Guardian of Safe Working to attend future meetings.**

The Director of Nursing referred to the section of the paper which highlighted concerns regarding the provision of robust support and supervision for Advanced Clinical Practitioners (ACPs) recruited to support the surgical teams and reported any issues would be escalated to

herself or the Medical Director.

The Chief Executive reported the Director of Nursing and Chief Operating Officer would formally respond to the issues raised within the paper. **Action: Director of Nursing/Chief Operating Officer.**

The Chair outlined the importance of future Guardian of Safe Working reports also incorporating responses to recommendations made. **Action: Medical Director to share this request with the Guardian of Safe Working.**

Trust Board thanked the Guardian of Safe Working for the report.

140/19 COMPANY SECRETARY'S REPORT

The Associate Director of Corporate Affairs introduced the report which contained draft terms of reference for the Board of Directors for comment/approval and the Board work programme. LM believed the following changes should be made (**Action: Associate Director of Corporate Affairs to incorporate**):

- References to 'the corporation' to be replaced with 'the Trust'; and
- The responsibilities of the Board and its members to be updated to reflect those within the constitution, or a sentence added to the terms of reference which states the duties highlighted are in addition to those in the constitution.

The Chair highlighted:

- The quorum in the terms of reference should what was in the constitution, with the words 'in practice, this means there will be a minimum of xx Board members' added to these terms of reference; and
- The requirement for the Chair or Deputy Chair to Chair Board meetings to be added;
- Clear distinctions to be made between a Board member and members of the Trust.

The Chair also noted a reference within the terms of reference to Board members avoiding conflicts of interest and pointed out the importance of Board members recording and declaring their interests as they arose.

The Associate Director of Corporate Affairs invited Board members to contact her directly with any comments regarding the work plan.

Trust Board:

- **Approved the Board of Director terms of reference, subject to the above comments being incorporated into these; and**
- **Noted the Board work plan.**

141/19 ANY OTHER BUSINESS

Board Meetings

The Chief Operating Officer believed consideration should be given to periodically holding Board meetings in different locations. The Chief Executive highlighted the importance of the Board taking the opportunity to meet with the key stakeholders should it pursue this course of action. The Director of People and OD considered it appropriate that the Board hold its Strategy Day meetings in the community as this would provide the Board with a meaningful amount of time to engage with stakeholders. JC considered it appropriate that the meetings

be held at Castleberg and Skipton hospitals. **Action: Chair/Chief Executive/Associate Director of Corporate Affairs to timetable into the Board work programme.**

Freedom to Speak Up Non-Executive Director

The Chair reported MaH had been appointed to undertake this role with effect from 1 October 2019.

The Chair then:

- Thanked the Interim Head of People and Organisational Development for leading the People and Organisational Development team, including attending Board meetings in the period to the replacement Director of People and Organisational Development starting with the Trust; and
- Reported LM's term of office as a Non-Executive Director for the Trust would end on 30 September 2019. The Chair pointed out LM had made a significant contribution to the Board and hospital and thanked her for her hard work and commitment as a Board member. NM would become the Trust's Deputy Chair with effect from 1 October 2019.

There were no other items of business and the meeting concluded at 11.40 am.

142/19 REVIEW AND CLOSE OF MEETING

The Board meeting had run to time and was followed by flu vaccinations for Board members.

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: <ul style="list-style-type: none"> - 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 November 2019 Integrated Performance Report	June Sept 2019 Board October Nov 2019 Bard		

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 November 2019 Integrated Performance Report	August Sept Oct-Nov 2019 Board		
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		
26/6/19-5	<u>Patient Experience Trends Analysis</u> Quality and Safety Committee to consider the format of future Patient Trend Analysis papers	JA	Reported as complete at September Board.	July Sept 2019		25/9/19
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	Executive Director training taking place on 11/11/19. Board training taking place on 14/11/19.	August Nov 2019		
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 SPC Charts.	AG/BB/ VP	Meeting being organised to discuss	Sept Oct 2019		
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	Reported as complete at September Board	Sept 2019		25/9/19
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/ MaH	To be deferred until Pathway to Excellence pilot is underway.	tbc		

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> Director of People and Organisational Development to forward a report to Trust Board early in 2020 regarding the effectiveness of the reciprocal mentoring arrangements.	JH		March 2020		
25/9/19-1	<u>Patient Story</u> Associate Director of Quality and Safety/Director of Nursing to agree how to share the learnings from the patient story (regarding the need for family members/carers to be involved in the recovery process) with partners across the system.	AS/JA		Oct 2019		
25/9/19-2	<u>Written Reports from Sub-Committee Chairs</u> Head of Corporate Governance to timetable a paper regarding fundraising plans into the Charitable Funds Committee and Board work programmes.	SJ	Completed	Oct 2019		4/10/19
25/9/19-3	<u>Integrated Governance Report</u> Associate Director of Strategy, Planning and Partnerships/Chief Operating Officer to highlight both underlying and actual performance information within future reports.	SS/RA		Nov 2019		
25/5/19-4	<u>Integrated Governance Report</u> Director of People and OD/Associate Director of Strategy, Planning and Partnerships to review the metrics utilised to inform the People element of the spider diagram.	JH/SS		Nov 2019		
25/5/19-5	<u>Integrated Governance Report</u> Associate Director of Strategy, Planning and Partnerships to determine how system level issues might be captured within the report.	SS		Nov 2019		
25/5/19-6	<u>Integrated Governance Report</u> Associate Director of Strategy, Planning and Partnerships to consider how the format of the report might be streamlined to enable easier and more effective navigation of the key issues.	SS		Nov 2019		

25/5/19-7	<u>Nursing and Midwifery Staffing Report</u> Director of Nursing to incorporate information regarding the Pathway to Excellence Programme into the October Nursing and Midwifery Staffing report.	JA		Oct 2019		
25/5/19-8	<u>Annual Reports</u> Director of Nursing to ensure future cover papers (Infection Prevention) highlight key points and assurances.	JA		Sept 2020		
25/5/19-9	<u>Annual Reports</u> Medical Director to share the dates of future Board meetings with the Guardian of Safe Working and request his attendance at these.	KM		Oct 2019		
25/5/19-10	<u>Annual Reports</u> Medical Director to inform the Guardian of Safe Working of the Board's request that future reports also incorporate responses to recommendations made.	KM		Oct 2019		
25/5/19-11	<u>Annual Reports</u> Director of Nursing/Chief Operating Officer to formally respond to the Guardian of Safe Working regarding the issues highlighted through the Guardian of Safe Working report.	JA/RA		Oct 2019		
25/5/19-12	<u>Company Secretary's Report</u> Associate Director of Corporate Affairs to amend the Board of Directors terms of reference to reflect the comments made at the September 2019 Board meeting.	VP		Oct 2019		
25/5/19-13	<u>Any other Business</u> Chair/Chief Executive/Associate Director of Corporate Affairs to agree which Board Strategy meetings should be held at the Castleberg and Skipton hospitals and how to maximise the opportunity for stakeholder engagement on these days.	AG/BB/ VP	Meeting being organised to discuss.	Oct 2019		