

**MEETING OF THE BOARD OF DIRECTORS
HELD AT 9.30AM ON WEDNESDAY 30 OCTOBER 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
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
Karl Mainprize, Medical Director
Nadira Mirza, Non-Executive Director

IN ATTENDANCE:

Stella Jackson, Head of Corporate Governance (minute taker)
Victoria Pickles, Associate Director of Corporate Affairs
Stuart Shaw, Associate Director of Strategy, Planning & Partnerships
Amy Whitaker, Deputy Director of Finance

APOLOGIES: Jeremy Cross, Non-Executive Director
Amanda Stanford, Associate Director of Quality and Safety

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

143/19 WELCOME

The Chair welcomed everyone to the meeting and reported that whilst it had been announced a General Election would take place in December, the Purdah period had not yet commenced.

144/19 DECLARATIONS OF INTEREST

There were no declarations of interest.

145/19 PATIENT STORY

This month's patient story was about Simon, who spoke of his experiences of using the Trust's and other NHS services since 2016. Simon's life changed forever when he had an accident during a cycling event in London and had a bleed on the brain. He was treated in London and subsequently transferred to Airedale. In both places he said his care was exceptional, including his follow up care from the Craven collaborative care team. He subsequently had a second bleed on the brain, and was treated at Airedale and in Leeds. Recovering from that, he then suffered from cardiac arrest. He was once again treated in Airedale and Leeds and he had follow up care which included counselling.

Simon was undergoing the care of the Trust's cardiac rehabilitation team and was a very enthusiastic member of the team's Healthy Heart exercise programme. He spoke highly of his care from that team.

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

- The story demonstrated the importance of high quality care provision both within hospital and within the community. It also demonstrated that healing was in two parts: physical and mental wellbeing;
- The Psychologist played a key role in helping Simon to come to terms with the cycling trauma;
- The only issue experienced during his care related to the advice received from a junior doctor about his ability to fly and the failure of the Trust to send him a follow-up invitation for one of his appointments; and
- The joined up care provision had been excellent.

Simon informed the Board he wanted to offer his support to the Trust as a thank you for the level of care received and it was **agreed** that he would work with the Communications team to promote the Healthy Heart Programme. **Action: Associate Director of Corporate Affairs to oversee.**

The Board thanked Simon for sharing his story and apologised for the judgement made by the junior doctor regarding his ability to fly.

146/19 MINUTES OF THE BOARD MEETING HELD ON 31 JULY 2019

The minutes of the Board meeting held on 25 September 2019 were approved as a correct record of the meeting, subject to the first full sentence at the top of page 4 being amended to read 'In response, the Director of People and OD reported a national review of core mandatory training requirements was being undertaken.....'

147/19 MATTERS ARISING NOT COVERED ELSEWHERE ON THE AGENDA

Actions

- 249/18 (1): NHS Code of Governance – it was unclear when the revised Code of Governance would be published. Consequently, a review of the constitution would take place early in the New Year and this item could be removed from the action list;
- 26/6/19-2: Report of the Chief Executive – a proposal regarding Governor engagement would be considered at the Council of Governors meeting on 31 October 2019;
- 31/7/19-2: Integrated Governance Report – a meeting had taken place regarding the timetabling of Board discussion and training regarding the content of the SPC charts;
- 25/9/19-2: Patient Story – the learning from the patient story at the September Board meeting (regarding the need for family members/carers to be involved in the recovery process) would be shared through the carer's workstream (in which the family would be involved). Consequently, this action could be recorded as complete;
- 25/5/19-7: Nursing and Midwifery Staffing Report – information regarding the Pathway to Excellence Programme had been incorporated into the Nursing and Midwifery Staffing report, due to be considered later in the meeting; and
- 25/5/19-9 and 10: Annual Reports – the Guardian of Safe Working had resigned due to other work commitments and arrangements were in hand to appoint a successor.

The dates of future Board meetings and discussion at the September Board meeting regarding the Guardian of Safe Working report would be shared with the new appointee.

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

148/19 CHAIR'S BRIEFING

The Chair's briefing was taken as read.

The Board noted the Chair's briefing.

149/19 REPORT OF THE CHIEF EXECUTIVE

The report highlighted developments of strategic relevance to the Trust and covered the period since the Board meeting on 25 September 2019. The Chief Executive pointed out that whilst the report contained information of a strategic nature regarding developments at local and national level, it was important the Board continued to remain sighted on the importance of patient care (as demonstrated through the patient story).

- MHe queried whether the Board would receive a further Emergency Preparedness, Resilience and Response self-certification (at Appendix 1). In response, the Chief Executive pointed out further business continuity work would be undertaken in the areas of Digital, Operations and Brexit;
- RD noted the report highlighted much activity was being undertaken at local and system level. The Chief Executive believed the current level of activities would continue and reported that heightened levels of operational activity (when compared to the previous year) were envisaged;
- The Chair referred to the 'freedom to speak up' activities contained within the report and highlighted he was aware that the Freedom to Speak Up (FTSU) Guardian was starting a secondment later in the week. He highlighted the importance of this role and asked how the FTSU activities would be managed during the period of the secondment. In response, the Director of People and OD reported the FTSU duties would be shared between two colleagues and the appointment of FTSU Champions would also provide some support; and
- The Chair referred to appendix 4 of the paper and queried how the Trust was influencing the top ten priority ambitions, in particular that relating to climate change. The Chief Executive reported environmental sustainability had been discussed at a West Yorkshire Association of Acute Trusts Committee in Common meeting. The Chair considered it important that the Trust promote its own sustainability initiatives as he believed the work being undertaken could prove attractive to potential new recruits (especially the younger generation).

Trust Board:

- **Noted the Chief Executive's report; and**
- **Approved the Emergency Preparedness, Resilience and Response self-certification.**

150/19 WRITTEN REPORTS FROM SUB-COMMITTEE CHAIRS

Audit and Risk Committee, 22 October 2019

The report was taken as read. The Committee Chair reported the limited assurance items

would be addressed and monitored. The Chief Executive asked whether the limited assurance triangulated with the CQC findings. In response the Associate Director of Corporate Affairs reported the issues identified in the Internal Audit reports differed from those identified by the CQC. In addition the Internal and External Auditors had not aligned their thinking regarding the treatment of the Trust and the annual assurance reporting. The External Auditors were undertaking audits and reporting at Group level whereas the Internal Auditors were undertaking activities at both a Trust and an individual entity level. Consequently, a discussion would be held with the auditors to ensure the necessary alignment occurred.

MHu reported the Committee had also considered the importance of audits adding value and of committee members ensuring relevant items from the committees meeting were picked up by the Audit and Risk Committee.

The Chair pointed out the accounting treatment referenced in the report referred to the deferred tax asset as referenced in the Finance, Digital & Performance Committee report back and highlighted the importance of Committee Chair papers being clear in their report backs.

Finance, Performance and Digital Committee, 22 October 2019

The report was taken as read.

Quality and Safety Committee , 23 October 2019

The Committee Chair drew the Board's attention to the recommendation that the name of the Committee change to 'Quality and Patient Safety Committee'. Board members **agreed** that whilst a key focus of the Committee was on patients, it was not the sole focus and could deter any focus on the workforce. Consequently, it was **agreed** the name should not change.

The Chair queried whether the system-wide Quality Committee had been established. The Medical Director confirmed it had and the Board **agreed** the Trust's Quality and Safety Committee should request the system-wide Committee to consider the Pathology workload issue and report its resolution to the Trust. **Action: Associate Director of Quality and Safety to ensure this occurs.** The Board also agreed the Integrated Performance reports should incorporate appropriate system-wide metrics. **Action: Associate Director of Strategy, Planning and Partnerships to ensure these are incorporated.**

Trust Board noted the Committee reports.

151/19 INTEGRATED PERFORMANCE 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 reported the format of the dashboard and KPIs within it were being refreshed and outlined changes made to the September report. Board members recognised the amount of time taken to produce the reports and outlined the importance of the process being automated where possible. The Chief Executive considered it appropriate that the amount of information/data within the reports be streamlined to ensure a focus by the Board on key performance metrics. The Director of Nursing informed Board colleagues the Trust did not currently have a live quality and data dashboard and reported full roll-out of the integrated care record would enable the development of a live system. The Director of Finance highlighted the need for the reports to capture system metrics where appropriate. Board members **agreed** the Integrated

Performance Report should be considered further at a Board Strategy Day. **Action: Associate Director of Strategy, Planning and Partnerships/Associate Director of Corporate Affairs to timetable discussion into the Board Work programme.**

The Chief Operating Officer then highlighted the following key points regarding operational performance:

- The Trust's Emergency Department (ED, previously referred to as A&E) and Referral to Treatment (RTT) performance, whilst below target, was better than that of a number of other trusts;
- There had been an increase in acuity and demand levels during the last three to four weeks;
- A number of initiatives had and continued to be implemented to improve ED performance including the trialling of virtual GP consultations; the extension of the Parkinson's trial; and the follow up (by the Digital Care hub) of patients recently discharged from hospital. It was envisaged performance would improve in the short term but would worsen once the winter season arrived;
- The pension issue was impacting on planned care activity and the Trust was, as a consequence, under-trading against its contract. This issue would impact on planning the following year;
- A recovery plan was in place regarding the diagnostic 6 week standard and it was envisaged the standard would be achieved by the end of December; and
- It was envisaged the Cancer standards would be achieved by the end of November. Whilst the 62 Day standard had not been achieved in September, performance for the quarter had been achieved.

The Chair queried why the waiting lists had increased when theatre utilisation was performing as expected. In response, the Chief Operating Officer pointed out the theatres metric only recorded actual operations and not the proportion of time the theatre was not being used. The Chair believed the report should be amended to reflect available and actual utilisation.

Action: Associate Director of Strategy, Planning and Partnerships to incorporate this information into future reports. The Chair then asked whether the Trust re-allocated theatre space to other trusts when periods of under-utilisation were being experienced.

Action: Chief Operating Officer to determine the feasibility of this. MHu noted a reference in the report to performance continuing to deteriorate unless the pension issue was resolved and asked how assured Board colleagues were that the Trust was doing everything possible to ease the pension impact. The Chair believed the Board needed to receive information outlining gaps by speciality area and action being taken to address the resultant issues. In response, the Chief Operating Officer reported the biggest impact was being experienced within the Trauma and Orthopaedics departments. The Director of People and OD informed Board members an update regarding the pensions issue would be provided during the Private Board meeting.

The Director of Nursing highlighted the following key points regarding the Quality and Safety performance:

- There had been no falls resulting in significant harm in November due to measures put in place to mitigate against these;
- Achievement of the Clostridium difficile threshold for 2019/20 remained at risk;
- The updated SSNAP reports showed a reduction in banding to a C. This was linked to staff turnover at Bradford Royal Infirmary; and
- The number of E.Coli infections was 15 year to date which was slightly higher than the same period in 2018. A gap analysis had been undertaken (utilising NHS Improvement measures) and the performance was not a concern.

The Director of People and OD then proposed that the Pulse Survey metrics and Staff Survey

metrics be removed from the report for November. She recommended that these measures be monitored by the People Committee and any exceptions highlighted to the Board. This approach would result in the dashboard providing a more accurate reflection of current workforce issues. The Board **agreed** this approach. The Director of People and OD highlighted the following additional key points regarding the people elements of the dashboard:

- Sickness absence, mandatory training and turnover performance was good; and
- Work was underway to ensure percentage agency spend level forecasts were robust as it was envisaged the ceiling would double during the year.

The Chair asked about progress the Trust had made in achieving its flu vaccination target given the commitment made to that at the last Board meeting. In response, the Director of Nursing reported current performance was 42% against an 80% target. The Trust was currently awaiting the delivery of additional flu vaccines and it was envisaged the target would be met. An update regarding performance would be provided through the Integrated Performance report.

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 £831k which was £350k better than plan. The attainment of a balanced position by the financial year end remained challenging;
- The Cost Improvement Programme had over-achieved at month 6 and it was envisaged the year-end forecast position would be achieved;
- Spend on agency staff was impacting on the Use of Resources rating; and
- The cash balance was ahead of plan due to a slippage on capital expenditure.

The Chief Executive outlined the importance of colleagues continuing to support the Trust to achieve its control total target.

Trust Board noted the financial report.

152/19 NURSING AND MIDWIFERY STAFFING REPORT

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

- Following a successful recruitment campaign, Midwifery ratios had improved (it was now at 1:28) as had one to one care in Labour at 96.4%;
- The Trust had successfully recruited 20 Registered Nurses (RNs) and an additional 8.6 whole time equivalents were expected to join by the end of December. Ten international registered nurses had been recruited and were expected to join the Trust in December/January. The Trust would also be undertaking a recruitment campaign in Ireland in November; and
- The report contained information regarding the Pathway to Excellence Programme.

The Board was pleased to note progress being made to recruit additional nurses and outlined the importance of colleagues across the Trust being informed of progress being made in this respect. **Action: Director of Nursing to oversee the development of a suitably worded message.**

Trust Board noted the monthly Nursing and Midwifery Staffing report.

153/19 COMPANY SECRETARY'S REPORT

The Associate Director of Corporate Affairs introduced the report which outlined changes to the Single Oversight Framework and contained information regarding the well led development review, the Board work programme, the refreshed programme of Board and Committee meetings and Charitable funds activities.

The Associate Director of Corporate Affairs reported there was a requirement for the Trust to undergo an external well led assessment at least every three years. As the Trust had had its last assessment in 2014, the external review would be undertaken by a consultancy - the Good Governance Institute - rather than by a neighbouring trust. The Chair added it had not been appropriate to undertake the review earlier due to there being a change of Chair and Chief Executive in short succession. The Good Governance Institute would be observing Board and Committee meetings in November and again in the New Year.

The Chair reported Committee meeting minutes would, in future, be made available to all Board members rather than be provided at each Private Board meeting for information. The work programme would be updated following the meeting. The Chair requested that the Board and Committee meeting schedule be updated to incorporate the additional Audit and Risk and Board meetings in May (to consider the financial accounts) and to incorporate the date of the Annual Members Meeting. He also pointed out the need for the paper deadline date to take account of committee meeting dates and suggested the deadline for the issue of papers in these instances would be 5.00 pm on the Thursday prior to the Board meeting. No papers would be accepted after this deadline. This was agreed. **Action: Head of Corporate Governance to arrange for the updated programme to be circulated to Board members.**

RD queried why the Charitable Funds expenditure was significantly higher than the income. In response, the Associate Director of Corporate Affairs informed the Board this was due to legacy funds being utilised. RD then asked what the administrative fees consisted of. The Associate Director of Corporate Affairs reported these covered all administrative work for the charity. She then reported a training day was being organised for the Charitable Funds Committee (to take place in the New Year) and Board colleagues, as trustees of the funds, would be invited to attend.

Trust Board noted:

- **The changes to the Single Oversight Framework;**
- **Work to undertake a well-led development review;**
- **The work programme would be updated following the Board meetings;**
- **The refreshed programme of Board and Committee meetings; and**
- **The Charitable Funds update.**

154/19 ANY OTHER BUSINESS

Christmas Lunch

The Chief Executive believed Board members should partake in the Christmas lunch initiative.

There were no other items of business and the meeting concluded at 11.35 am.

155/19 REVIEW AND CLOSE OF MEETING

The Board meeting had run to time.

PUBLIC TRUST BOARD MEETING
Wednesday 30 October 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. Agreed at October 2019 Board to remove this item from the action list.	TBC		30/10/19
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. The Trust's refreshed Strategy 2020 to 2025 is scheduled for review by the Board of Directors in January prior to being published. A set of supporting strategies are currently being developed that are aligned to our overall approach, with a view that these shall be available through the period February to May 2020. Initial work around a Commercial Strategy is being taken through and tested with the Finance, Performance and Digital Committee.	May 2019 June Sept 2019 Board Nov 2019 Board May 2020 Board		

	<p>Associate Director of Strategy, Planning and Partnerships to take the following comments into account when producing the next iteration of the dashboard:</p> <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	<p>IPR refreshed to take account of comments received. A further review to take place in September 2019.</p> <p>Update: Review in progress. Updates to be reflected in October November 2019 Integrated Performance Report</p>	<p>June Sept 2019 Board October Nov 2019 Board</p>		
29/5/19-2	<p><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.</p>	BB	Incorporated into the report for the November meeting.	Nov 2019		
29/5/19-4	<p><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</p>	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	<p>August Sept Oct Nov 2019 Board</p>		
26/6/19-2	<p><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.</p>	VP/SJ/JS	<p>To incorporate into the revised Engagement Strategy.</p> <p>A proposal regarding membership engagement to be considered at the Council of Governors meeting on 31 October 2019.</p>	<p>Sept Oct 2019</p>		31/10/19
26/6/19-6	<p><u>Emergency Planning Annual Report</u> Chief Operating Officer to organise a 'command and control' table top exercise for all Board members.</p>	RA	Executive Director training taking place on 11/11/19. Board training taking place on 14/11/19.	<p>August Nov 2019</p>		14/11/19
31/7/19-2	<p><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.</p>	AG/BB/VP	<p>Meeting being organised to discuss.</p> <p>Reported at October Board that this matter had been given consideration.</p>	<p>Sept Oct 2019</p>		30/10/19

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.	January 2020		
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	Added to the Board work programme	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	Reported as complete at October Board – the family would be involved in the carer’s workstream and information and influence would be shared via that route.	Oct 2019		30/10/19
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	Incorporated into the report	Oct 2019		30/10/19
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	Information to be shared with the Guardian of Safe Working once appointed.	Oct 2019		30/10/19
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	Information to be shared with the Guardian of Safe Working once appointed.	Oct 2019		30/10/19
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	Information to be shared with the Guardian of Safe Working once appointed.	Oct 2019		31/10/19
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	Completed	Oct 2019		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 Nov 2019		
30/10/19-1	<u>Patient Story</u> Associate Director of Corporate Affairs to oversee the promotion of the Healthy Heart Programme by the Communications team/Simon.	VP		Nov 2019		

30/10/19-2	<u>Written Reports from Sub-Committee Chairs</u> Associate Director of Quality and Safety to ensure the Quality and Safety Committee forwards a request to the system-wide Quality Committee to consider and report back on the Pathology issue.	AS		Nov 2019		
30/10/19-3	<u>Written Reports from Sub-Committee Chairs</u> Associate Director of Strategy, Planning and Partnerships to ensure appropriate system-related metrics are incorporated into the Integrated Performance report.	SS		Nov 2019		

30/10/19-4	<u>Integrated Performance Report</u> Associate Director of Strategy, Planning and Partnerships/Associate Director of Corporate Affairs to timetable a Board Strategy Day discussion into the Board Work programme regarding the Integrated Performance Report content and method of production.	SS/VP	Timetabled for the February Board Strategy Day	Nov 2019		12/11/9
30/10/19-5	<u>Integrated Performance Report</u> Associate Director of Strategy, Planning and Partnerships to incorporate available and actual theatre utilisation into future reports.	SS		Nov 2019		
30/10/19-6	<u>Integrated Performance Report</u> Chief Operating Officer to determine the feasibility of re-allocating theatre space to other trusts during periods of under-utilisation.	RA		Nov 2019		
30/10/19-7	<u>Nursing and Midwifery Staffing Report</u> Director of Nursing to ensure a suitably worded communication is sent to staff regarding the outcome of the Trust's recruitment efforts.	JA		Nov 2019		
30/10/19-8	<u>Company Secretary's Report</u> Head of Corporate Governance to arrange for the updated Board/Committee meeting programme to be circulated to Board members.	SJ	Circulated via email	Nov 2019		13/11/19