

**MEETING OF THE PUBLIC BOARD OF DIRECTORS
HELD AT 9.30AM ON WEDNESDAY 2 SEPTEMBER 2020
VIA MICROSOFT TEAMS**

PRESENT: Andrew Gold (AG), Chair
Rob Aitchison (RA), Chief Operating Officer (for items 9 and 10)
Brendan Brown (BB), Chief Executive
David Crampsey, Medical Director
Rhys Davies (RD), Non-Executive Director
Andrew Dumbleton (AD), Non-Executive Director
Jo Harrison (JH), Director of People and Organisational Development
Melanie Hudson (MH), Non-Executive Director
Nadira Mirza (NM), Non-Executive Director
David Wharfe (DW), Non-Executive Director
Amy Whitaker (AWH), Interim Director of Finance
Andy Withers (AWI), Non-Executive Director

IN ATTENDANCE: Cindy Fedell (CF), Chief Digital and Information Officer
Cath Gregson (CG), Director of Operations, Medical Division
Victoria Pickles (VP), Associate Director of Corporate Affairs (minute taker)
Stuart Shaw (SS), Associate Director of Strategy, Planning & Partnerships

Two public Governors and one observer also attended the meeting.

67/20 WELCOME

The Chair welcomed everyone to the meeting.

68/20 APOLOGIES FOR ABSENCE

Apologies for absence were received from Jill Asbury, Director of Nursing; and Amanda Stanford, Associate Director of Quality and Safety

69/20 DECLARATIONS OF INTEREST

There were no declarations of interest.

70/20 PATIENT STORY

The Associate Director of Corporate Affairs provided a patient story in relation to a 100 year old patient who had raised concerns at the length of time she waited in the discharge lounge for transport home following hip replacement surgery. The Associate Director of Corporate Affairs explained that the Matron for Patient Flow had been working with Yorkshire Ambulance Service as the 'after 4pm' ambulance service for discharges at Airedale NHS Foundation Trust had been poor. Further work has since improved the service, with plans for online bookings soon to improve flow. The patient had been contacted with the plans and current level of service and was happy with this progress and did not require further information.

Discussion was then had on the experience of the patient. It was noted that the patient remains on the system until they leave the premises. It was highlighted that the patient needs

to feel like they are still being cared for by the Trust during the discharge process and that there needs to be good communication with the patient to ensure that they are clear on what is happening. There was a question as to whether there are metrics on the waiting times in the discharge lounge reported at divisional level. There was also discussion on the support provided for the individual when they arrive home and that the Trust should also consider those patients being discharged to other parts of the system. The Chief Executive highlighted that elderly patients should be morning discharges wherever possible. He added that each health system has been asked to identify an executive lead for discharges which for Airedale would be the Chief Operating Officer.

The Board asked that the Quality and Safety Committee review the quality metrics in relation to the experience of discharge and transfer. The Chair asked that thanks be sent to the patient for raising their concerns.

71/20 MINUTES OF BOARD MEETING HELD ON 1 JULY 2020

The minutes of the Board meeting held on 1 July 2020 were approved as a true and accurate record.

Actions

- 6/3/20 – 1 It was noted that the True for Us report regarding maternity services would be brought to the next meeting along with 1/7/20-7 how maternity oversight might be strengthened.

All other actions were complete or not due at this meeting.

73/20 CHAIR'S BRIEFING

The Chair highlighted that in addition to the activity in the report, he had attended the West Yorkshire Health and Care Partnership board meeting with the Chief Executive on 1 September. The key items for discussion had been the Black, Asian, and minority ethnic (BAME) issues highlighted during Covid; the important role of the voluntary and community sector and how that was coping during the pandemic.

Trust Board noted the Chair's briefing.

74/20 CHIEF EXECUTIVE'S REPORT

The report was taken as read. The Chief Executive highlighted the following points:

- The importance of being transparent as leaders and there is a review of the processes during Covid19. This report will be finalised alongside the internal audit report and will go to Quality and Safety Committee and then brought to Board in November.
- The local lockdown arrangements and the challenge of having different local authority ward areas under differing lockdown restrictions. He highlighted the growing concern that there would be a further surge in September.
- The flu programme within the Trust will begin later in the month as part of the preparations for winter and there will be a focus on all staff receiving the flu vaccination.
- The People Plan has been published and the Trust's plan fits with the key items described in the national document. There will be a focus on support for vulnerable and BAME colleagues. He highlighted the focus groups held with BAME colleagues across the Trust and the need to have a conversation as a Board as to what we need to do as leaders.
- Act as One is the way in which we will work as a system and how we can improve pathways for our patients. A board development session will consider the impact of this for the Trust and the future vision for Airedale.
- The bid for a new hospital build which is likely to be considered as part of the comprehensive spending review. It was noted that the Board has approved a draft

Strategic Outline Case for the build.

The Director Of People and OD confirmed that 97% of all BAME colleagues and 95% of all vulnerable groups had undertaken a risk assessment. Nationally the portal has been reopened for the Trust to renew its figures taking into account the new rotation of doctors. In addition the Trust has made a decision to bring shielded colleagues back in to work by the end of September in light of the lifting of restrictions.

The Interim Director of Finance reported on the feedback from the national inclusion group for finance colleagues and that other protected groups are feeling left behind as a result of the focus on BAME colleagues. The Chief Executive responded that we do need to take account of other groups, including the gender, while not diluting the focus on BAME colleagues. The Director of People and OD highlighted that the Trust has other protected characteristic focus groups with which there is ongoing engagement.

AWi highlighted the issue of visiting and guidance for local people. The Chief Executive responded that the Trust has maintained consistency with its visiting policy alongside individual conversations with families. This remains a challenge given the changing national context and messaging. This will be kept under review as part of the Gold command considerations.

Trust Board:

- **Noted the Chief Executive report**

75/20 REPORTS FROM COMMITTEE CHAIRS

Charitable Funds Committee held on 2 July 2020

AD highlighted the amount of work undertaken by the Charity over the previous 12 months. AWi asked about the ongoing revenue impact of the psychology support and that this should be considered as part of a wider package of mental health support offered to colleagues. The Associate Director of Corporate Affairs responded that this would be considered and formally evaluated as part of the business planning process. The Director of People and OD explained that the evaluation would form part of the discussions that are happening at a system level following learning from the pandemic as to the level and capacity of support required. She explained that the Trust is seeing increasing rates of mental health illness including stress and that this is an important part of the health and wellbeing support.

AD also highlighted the proposed changes to the terms of reference for the Committee, with a strengthened membership which included a governor as a member of the Committee.

- **Trust Board approved the funding for the psychological support and approved the terms of reference for the Committee.**

Audit and Risk Committee held on 28 July 2020

The report was taken as read. DW highlighted the clean opinion on the annual accounts from the External Auditors and that they had highlighted the need to keep an eye on the cost improvement processes once the financial system is reinstated.

Finance, Performance and Digital Committee held on 28 July 2020

The Board noted the red assurance rating regarding the discrepancy of £8.5 million between the Trust and NHSI plans. The Interim Director of Finance explained that there is national guidance awaited on this from the Treasury and that it is likely to be wrapped up in the wider financial envelope for the NHS, but that it is unclear when this will be released. The Chair asked if the Trust had NHS Improvement (NHS I) support. The Interim Director of Finance responded that NHS I had reviewed and agreed the figures submitted to Treasury and that this has been confirmed in writing from NHS I. The Chair also asked whether there are other Trusts affected. The Interim Director of Finance responded that there are a lot of Trusts

affected by this process. The Chief Executive pointed out that the proposed new build would also have an impact on the underlying financial position. The Interim Director of Finance clarified that the risks associated with not receiving the funding had been highlighted to NHSI and that the Trust was receiving the top up funding each month. The Chair clarified that this is material risk to the Trust, although the likelihood is low, and that the Board's risk tolerance is low and therefore the Trust was committed to spending the £8.5M, as without it there would likely be detriment and harm in the patient experience at Airedale. The Chief Executive pointed out that there may be value in the ICS writing to NHS I on behalf of the affected Trusts.

People Committee held on 29 July 2020

The report was taken as read. MH highlighted the raising of the risk in relation to the international nurse recruitment. She added that the Committee had agreed to keep the risk around the BAME risk assessments at amber, although it is likely that this would be reduced in light of the update at this meeting

NM asked a question in relation to the visa issue for international colleagues. The Director of People and OD explained that this had been addressed. In addition she confirmed that the flights had been booked for 15 international colleagues for Friday 4 September.

The Chair commented that he was pleased that the Committee would be meeting more frequently in future given that people are at the heart of the Trust and the number of workstreams in place relating to the workforce.

Quality and Safety Committee meetings held on 29 July 2020

AWi highlighted the issue in relation to the ligature risk and that there is ongoing work to address these risks and that there is a serious incident relating to ligature risks being investigated. The CEO highlighted that this remains an ongoing issue for all Trusts and that the Committee would need to keep it in view. The Medical Director commented that the Covid-19 is impacting on the mental health of the Trust's communities. It was noted that it would be helpful to have a deep dive at the Committee on the impact on mental health; the support available across the system, particularly in shared pathways; and how these are managed and governed

ACTION Q&S Committee to consider the quality and safety impacts in the first instance.

The Associate Director of Corporate Affairs highlighted the differing conclusions in the reports as to the level of assurance received and that it would be helpful to have a discussion on this at the next meeting of Committee chairs. DW suggested that the classifications of assurance used by the Trust's internal auditors might be a good guide to consider. The Director of People and OD asked that this review consider how assurance ratings reflect what is within the Trust's control and what isn't.

ACTION Committee Chairs to review

76/20 INTEGRATED BOARD REPORT

The Chair highlighted that the Committees have not met during August to scrutinise the report and so this was the first time that Board colleagues would be reviewing the updated figures. It was noted that the report did not contain any people information due to maintenance work being undertaken on the electronic staff record.

The Director of Strategy and Planning introduced the report and highlighted the following key points:

- Number of covid cases within the Trust have continued to reduce and has therefore enabled some capacity moves to support reset planning
- The Trust continues to operate a fully covid secure environment which has an impact on everything that we do in terms of speed and complexity

- There are increasing levels of demand as both the Trust and society has begun to re-open and restart
- The financial regime going forward remains unclear

The Chief Operating Officer reported that there continues to be good performance in the emergency care standard but there was work to do to ensure that they can continue to maintain flow as numbers increase. He highlighted the need to ensure that the Trust could balance planning for winter while maintaining elective capacity.

The Chief Operating Officer added that there was increasing elective capacity both in the Trust and in the independent sector. It was noted that as referrals increase, the numbers of patients waiting less than 18 weeks will increase and therefore performance will improve in the short term.

Diagnostic performance has continued to improve. There has been good progress against the cancer standards He pointed out that there is a clear backlog of demand which is being worked through on a clinical needs basis.

DW asked about the financial flows associated with use of the independent sector. The Chief Operating Officer explained that the independent sector provides nursing capacity and there is guidance on how this will be paid for. The Interim Director of Finance clarified that this is being commissioned nationally until the end of December and this is likely to be to the end of March if it is being fully utilised.

AD asked about the order of clinical priority and how this is communicated to the public. The Chief Operating Officer explained that if a patient is referred as a fast track they are prioritised. Others patients are triaged using fairly well established criteria according to clinical risk. The Medical Director added that the decision is made in conjunction with the patient. There is also a process of seeing the longest waiters first. The Medical Director added that nationally there is an ask to do high volume activity first but that the Trust's clinical reference group were clear about the need to clinically prioritise patients based on likely harm or detriment. The Board supported this position.

RD asked about the length of stay and delayed transfer of care (DTC) metric. The Chief Operating Officer responded that the DTC metric is a particular subset of patients who are medically fit for discharge and doesn't take into account all patients who could leave hospital, but these patients will need a number of things to support their discharge, for example house adaptations, or a community bed. He highlighted the importance of partnership working and the need to maintain relationships across the system. CG explained that new discharge guidance had been published which focuses on discharge to assess. She added that there is work to do jointly to understand the gaps and how they are addressed together as partners.

MH asked about the impact in the reduction of quicker turnaround covid tests. The Chief Operating Officer explained that there continue to be changes to the availability of tests and that home tests would be coming on stream for elective patients. He added that this was likely to be addressed before winter but that there would need to be access to some form of rapid tests.

The Chair highlighted the theatre utilisation metrics doesn't include the theatres that are closed and how this information is used to support the planning processes. The Associate Director of Strategy and Planning explained that this metric would be reviewed as part of the reset process. He added that the full reporting suite will be reviewed and recommendations made as to any adjustments in metrics.

ACTION: SS / RA November board meeting

The Medical Director informed the Board that two lead medical examiners had been appointed across Bradford District and Craven, to provide a service across both acute trusts and that he would provide an update on the development of this service at a future board.

The Medical Director highlighted the stroke service and the SSNAP measure being a lag measure. He explained that early indications were that there will be an improvement to a 'c' rating.

The Chair asked about the IPC data being up to the end of May which had been received at the July Board. The Medical Director explained that there would be a review of the quality and safety metrics and how these can be improved to provide a clearer picture in relation to quality and safety within the Trust. These would include maternity metrics and that these would be considered in line with the True for Us report.

The Interim Director of Finance reported a balanced position including the full top up payment which fully aligns to the costs associated with resetting services. She added that the Trust had received capital programme funding and that the cash position remained strong. She highlighted a small risk in relation to £200K funding as part of the phase one capital plan but that if this was not received there would be an opportunity to reprioritise the capital plan to ensure that there is not an overspend.

It was noted that medical staffing was driving the agency spend. Nursing was not currently contributing to this but likely to see an increase in this as we approach winter and may require the use of agencies not on the framework. The Chief Executive highlighted that finance is not working in a normal way at a national level. DW asked about the use of agencies that are not on the framework. The Director of People and OD explained that there was work to stress test the workforce plan and would be discussed as part of the reset plan.

Trust Board received the Integrated Board Report.

78/20 EMERGENCY PREPAREDNESS, RESILIENCE AND RESPONSE (EPRR) ANNUAL REPORT 2019/20 AND MAJOR INCIDENT PLAN

RA introduced the report which demonstrates compliance with the standards for EPRR. It was noted that having completed the 2019 NHSE Core Standards for EPRR self-assessment, the Trust has declared "substantial" compliance. Two areas were identified as partially compliant: one in relation to estates which were out of the control of the Trust and would be addressed with external partners; the second related to plans being up to date, which had been delayed due to Covid-19 and work was underway to review and update these plans. The Chief Executive highlighted the need to revisit this in October pending the result of the comprehensive spending review as it might affect the mitigating actions in relation to the estate. RA confirmed there is a desk top exercise relating to RAAC at the end of September that may also inform the plans.

Trust Board:

- **Approved the Major Incident Plan and supported the self-assessment.**

79/20 COMPANY SECRETARY'S REPORT

Standing Orders/Standing Financial Instructions/Scheme of Delegation

VP highlighted that a number of minor changes had been made to the standing orders, that the standing financial instructions and scheme of delegation had been amended to reflect current practice.

Board of Directors Terms of Reference

It was agreed to amend the wording in section 3 to read 'The Board of Directors collectively and individually has a duty of candour, meaning they must be open and transparent with patients and their carers about their care and treatment, including when it goes wrong.'

Well-Led Review action plan update

VP highlighted the action that was behind plan and confirmed that this would be complete by the end of the month.

Work plan

The Board reviewed the work plan and noted the need for an additional meeting at the end of September to review a tender opportunity for AGH Solutions. It was noted that the Board Appointments, Remuneration and Terms of Service Committee terms of reference had not yet been approved by the Committee so would come to a future Board meeting.

Trust Board:

- **Approved the changes to the Standing Orders/Standing Financial Instructions/Scheme of Delegation;**
- **Approved the terms of reference for the Board of Directors;**
- **Noted the progress against the well-led review action plan; and**
- **Noted the Board work programme.**

80/20 ANNUAL REPORTS

Safeguarding Adults and Children 2019/20

It was noted that this had previously been considered by the Quality and Safety Committee. MH asked for data in relation to protected characteristics. It was agreed that the Director of People and OD would request that the Nursing Director provide this information to the Board after the meeting.

ACTION: JH

Infection Prevention and Control 2019/20

The Board noted that this had been previously considered and recommended for approval by the Quality and Safety Committee.

Trust Board approved the reports.

81/20 ANY OTHER BUSINESS

The Chair highlighted that it was Cindy Fedell's last meeting and thanked her for the difference and contribution she has made to the Trust.

There were no other items of business.

82/20 FOCUS OF COMMUNICATION MESSAGES TO STAFF AND STAKEHOLDERS

Board members **agreed** information regarding the following should be shared with staff and other key stakeholders:

- The work that the Trust has done to manage Covid-19 and in resetting services and that the Trust would be treating all patients consistently irrespective of where they lived and the position in relation to lockdown measures
- That the Board had received a patient story on discharge.
- That there would be a clear clinical assessment process for prioritising waiting lists.
- The health and wellbeing support that is being offered to colleagues across the Trust
- Highlighting that the Chief Executive would be the Board lead for inequalities
- The work being done to secure a new build

83/20 REVIEW AND CLOSE OF MEETING

Board members believed the meeting had been effective and the majority of time had been spent discussing key matters, in particular scrutinising the Integrated Board Report given the committees hadn't met during the previous month. The Board also reflected on the patient story item and how it would be possible to get the most out of these in a virtual world.

The meeting concluded at 12pm.

DATE AND TIME OF THE NEXT MEETING

The next Public Board of Directors meeting will take place on Wednesday 4 November 2020 at 9.30 am via Microsoft teams.

PUBLIC TRUST BOARD MEETING
Correct as @ 24 Sept 2020

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
	True for Us report on East Kent maternity issues to be completed	AS	This item to be deferred to November 2020	Nov 2020	R	
2/9/20 – 1	<u>Reports from Committees</u> Quality and Safety Committee to add item to work plan regarding impact on mental health; the support available across the system, particularly in shared pathways; and how these are managed and governed	AS / AWi	Added to Committee work plan	Nov 2020	G	
2/9/20 – 2	<u>Reports from Committees</u> Consider assurance ratings on committee report back reports at Chairs meeting	DW / VP	To be considered at meeting in October	Oct 2020	G	
2/9/20 – 3	<u>Integrated Board Report</u> Revised metrics to be proposed in report	SS		Nov 2020	G	
2/9/20 – 4	<u>Integrated Board Report</u> Medical Director to provide an update on medical examiner service	DC		Jan 2020	G	
1/7/20-1	<u>Review of Patient Stories</u> Director of Nursing/Associate Director of Patient Safety and Strategy to consider which services should be invited to submit a patient story (ensuring a representation of services throughout the year).	JA/AS		July 2020	G	
1/7/20-7	<u>Update on Maternity Services</u> Associate Director of Patient Safety and Quality to ask EDG to consider how maternity services oversight might be strengthened.	AS	To be deferred to November Board meeting and discussion be had alongside True for Us Report	July Nov 2020	G	

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	It was agreed at the May Board meeting this item should be rated amber, with the target date moved to post-COVID-19.	March 2020 TBC	A	
1/7/20-4	<u>Chief Executive's Report</u> Chief Executive to incorporate into the Chief Executive's report (on a quarterly basis) an update regarding Covid-19 governance arrangements.	BB		Nov 2020 March 2021	A	
2/9/20 – 5	<u>Annual Reports</u> Safeguarding Adults report – JH to request the Director of Nursing to provide the Board with data in relation to protected characteristics	JH	Director of Nursing asked to provide this information.	Nov 2020	B	Sept 2020
6/3/20-1	<u>Chief Executive's Report</u> True for Us report on Patterson case to be completed	DC	Ongoing receipt of the report at Board deferred to July due to Covid-19 pressures. It was reported at July Board that this matter would be timetabled for September 2020.	May July Sept 2020	B	
1/7/20-2	<u>Minutes of Board Meetings held on 6 May and 24 June 2020</u> Director of People and OD to invite the International Nurses to talk about their experiences of working at the Trust at a People Committee meeting.	JH	Deferred until new year 2021 – to be added to work plan for next year	July 2020	B	
1/7/20-6	<u>Integrated Board Report</u> Director of People and OD to discuss the sickness absence figure with DW.	JH/DW		July 2020	B	
6/5/20-2	<u>Written Reports from Committee Chairs</u> Associate Director of Corporate Affairs/Chair to timetable a Board Strategy discussion regarding the Trust's strategic intentions, transformational themes and risk appetite.	VP/AG	To be discussed at a Board Development meeting and built into the overall plan.	August 2020	B	