

Date of Meeting:	Wednesday 3 November 2021				
Meeting:	Public Board of Directors				
Title of report:	Chair's Briefing – item 6				
Author:	Andrew Gold, Chair				
Previous Forums:	None				
Purpose of the Report					
To inform the Board of the Chair's activities since 1 September Board meeting.					
Key Points to Note					
<p>Given the Trust's commitment to system working, the ongoing high levels of Partnership activity at both Place (Bradford District & Craven) and our region (West Yorkshire), in that embracing the ongoing major legislative change for the future provision of healthcare.</p> <p>System working remains essential to continue to optimise the delivery of the range of healthcare services sought by the Population and Patients the Trust serve. That encompasses all Covid-related requirements as well as a commitment to providing continued access to wider healthcare services, notably elective activity, for the population of Airedale, Wharfedale and Craven.</p> <p>The continuity of the Board's commitment to our People recognising the challenges in service delivery.</p> <p>All this will continue after Brendan Brown, the Trust's Chief Executive, leaves at the end of this year to become the CEO of Calderdale & Huddersfield NHS FT. Although we are sorry to lose such a strong and well-respected leader, we understand Brendan's reasons for this and fully support him, wishing him every success in his new role. On behalf of the whole Board, we record our thanks to Brendan for his significant contribution to this Trust including enabling the legacy of a strong, committed executive and senior leadership team such that the Trust remains in excellent hands and will continue to progress.</p>					
EQIA – Equality Impact Assessment					
Well led impact on our colleagues / patients / population					
Fit with strategic objective	Population	Patients	People	Partnership	Progressive
	X	X	X	X	X
Recommendation					
The Board is asked to note the Chair's activity in this briefing report.					



Chair's Briefing

Public Board meeting 3 November 2021

Introduction

This activity report is structured around five key themes the Board has recognised as the frame for developing the Airedale NHS Foundation Trust (the Trust) Board's strategy, namely partnerships, population, patients, progression and people.

Activity Since Last Public Board Meeting

Partnership activity included continued direct involvement in the NHS England/Improvement (NHSE/I) Chairs' Advisory Board meetings along with an Elective Recovery event for all Acute Trust Chairs and Chief Executives across the North of England. All these provide direct access to members of the NHSE/I Board and Leadership Team to exchange valuable insights on the challenges faced and explore available solutions.

There has also been attendance at the quarterly West Yorkshire Health & Care Partnership (WY HCP) Board meeting; chiring of the quarterly meeting of the WY&H HCP Climate Change Steering Group as well as attendance at the monthly WY HCP Chairs and Leaders Reference Group meetings. The latter is overseeing the steps being taken in our region to implement the new legislation for healthcare provision. An equivalent group is operating at Bradford District & Craven Place, and both the Trust's Chief Executive and I are involved alongside all our 'Act as One' partners in the monthly meetings for that. This activity enables the healthcare requirements of the Airedale, Wharfedale and Craven (AWC) population to be incorporated into the design of future healthcare provision both at Place and across WY.

Given the Trust's commitment to making a difference to population health through active participation in system working, in addition to continuing to have an active dialogue with Chairs of other healthcare providers in our Place I also attended, as did the Trust's Chief Executive, the quarterly Committee in Common (CIC) meeting of the West Yorkshire Association of Acute Trusts (WYAAT) held on 26 October. At that meeting WYAAT CIC supported taking a business case on Pharmacy Aseptic Services to each Trust Board for formal approval. This will form part of our Board discussions later today given the benefits of the approach outlined in that business case.

Population links have been maintained through continued interaction with the Trust's Council of Governors (COG). As well as involvement in the monthly Governor Informal Group meetings, COG met in public in October. That enabled sharing information and insights in fulfilling respective duties, with a key focus agreeing the plans and timetable for Governor Elections due to be held in spring 2022. The Trust's Annual Members' Meeting (AMM) was deferred from 24 September to 11 November due to circumstances outside of the Trust's control. As with the previous year's AMM, the meeting will be held virtually and enables the Trust to engage with the wider AWC community.

Patient related activity included attendance at a fortnightly Multi-Agency Discharge Event (MADE). Other Non-Executive Directors (NEDs) having also attended such meetings to gain further insight of the importance of MADE to support patient flow and optimising bed capacity through system working and the outturn of that shaping the Trust's workforce requirements. The Trust's Charity Committee held their latest quarterly meeting in October to review the continued progress of the Airedale Hospital & Community Charity and oversee the use of charitable funds raised from donations in ways that seek to enrich the Trust's service offering to the benefit of so many people.



Progressive activity includes the Board's continued oversight of the latest steps taken to further advance 'Securing our future' (a replacement healthcare facility at the Steeton site) along with the Reinforced Autoclaved Aerated Concrete (RAAC) significant risk faced by much of the Trust's Steeton estate. This remains key focus for the Trust Board and as such will be discussed as part of the agenda for today's Board meeting.

A Board Strategy meeting on 6 October focused on the Trust's response to the H2 (ie the period 1 October to 31 March 2022) priorities and operational planning guidance. The document reiterates the six priority areas for the first half of the year, published in March 2021. Systems and providers like the Trust had to submit by 14 October elective recovery and capacity plans as well as a proposed shortlist of investments for a Targeted Investment Fund, along with a 16 November deadline for submitting its final H2 plans to NHSE/I, which forms a key part of the agenda for Board discussions later today.

At the Board Strategy meeting on 6 October there was also an update on the legislative changes and their impact on this Trust with insight to the latest proposals for Place and its governance arrangements. In addition there was a discussion about the Trust's development of its approach to sustainability with a Green Plan to be produced and, after Trust Board approval, submitted to the WY HCP by 14 January 2022. As Chair of the Trust's Sustainability Committee, the focus of that Committee's most recent quarterly meeting in September was to oversee the outline approach to creation of the Trust's Green Plan with their next meeting in w/c 13 December due to review an advanced draft of the Green Plan. As the Trust's nominated Board lead for sustainability, I am undertaking Carbon Literacy Training on 1 November, an event attended by counterparts from many other Healthcare Providers across WY.

People activity remains focused on health and wellbeing support for all colleagues and a commitment to continuous improvement. This includes attendance, along with the Chief Executive and Director of People and Organisational Development, at the meetings held regularly with Staff Governors to hear and act on views they are sharing on behalf of the colleague body that they represent.

Since the last Board meeting, I have continued to be available to chair interview panels that colleagues arranged for various consultant appointments. In addition, with Ian Knight, joining the Trust as a NED on 1 August, I have overseen his induction and then agreed objectives, along with a supporting personal development plan, at the end of September in line with the Trust's approach for all colleagues to have clarity on the expectations of them and their role as well as any support they require. Furthermore, October saw me make time to complete various mandatory training modules to be up-to-date on all that in line with the Trust's expectation for all colleagues. Undertaking this remotely via the new e-learning available helped in completing the training, both as it could be accessed remotely as well as giving greater flexibility on when it could be carried out.

At the Nominations and Remuneration Committee (NRC) meeting held in September, the members of that Committee (three NEDs plus the Chief Executive) reviewed amongst other things the Trust's succession planning. The outcome of those discussions led to the Trust's Chief Operating Officer, Rob Aitchison, and Director of Corporate Affairs, Vicky Pickles, being appointed as joint Deputy Chief Executives from 1 October. Subsequent to that, all colleagues and partners were advised on 26 October that the Trust's Chief Executive, Brendan Brown, has been offered, and has accepted, the position of Chief Executive at Calderdale and Huddersfield Foundation Trust (CHFT) and will be leaving his current role at the end of December 2021.



One of my first acts as Chair of the Trust back in 2018 was to lead the Board in the appointment of a new Chief Executive in Brendan. I will draw upon all that experience in leading the Board during the recruitment of Brendan's successor which will be directly overseen by the NRC.

Currently I am liaising with leaders across Place, along with the regional leader for NHSE/I and WY HCP respectively, about the system responsibilities that Brendan held. As a Board we are in the process of agreeing our Chief Executive acting up arrangements, which we intend to put in place for a period of four months from the beginning of January while we work through our plans for future leadership arrangements. I am confident we have a strong executive leadership team in place here at the Trust who will be able to lead us through the challenges of winter and H2, our management of the significant risks associated with RAAC as well as support our workforce resilience during this period.

Recommendation

The Board is asked to note the Chair's activity in this briefing report.

