

CHAIR'S LOG: Chair's Key Issues and Assurance Model

Committee/Group: Quality	Date: 22nd September 2020	Chair: Lorraine Boyd
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Agenda Item	Issue and Lead Officer	Receiving Body, ie. Board or Committee	For Recommendation or Assurance to the receiving body
	FOR INFORMATION		FOR INFORMATION
6	Nurse staffing-update report was received and discussed. In particular the Board should be aware that York University came 6th in the league table for Nursing student satisfaction, a huge improvement on last year's position which is a great achievement and can only help recruitment and retention of these students to the area	Board	Assurance: no escalation of risk or harm associated with nurse staffing raised through August : good progress is being made on the Trust's 4 key developments for nursing training and recruitment Concerns: staff wellbeing and workforce challenges as result of winter pressures and additional pressures associated with likely upsurge in Coronavirus activity in the coming months.
6	CQC Update Report was received and discussed. We learned that as a result of personnel changes , communications with the CQC have improved. Evidence of compliance continues to be assimilated to support the application for the removal of the conditions associated with the Trust's registration. A "next-steps" CQC action plan will be developed and implemented by the end of October 2020, with a "Quality & Regulations Group" being implemented to provide oversight	Board	Assurance: focus on CQC Report continues : improved communication links : Quality and Regulations Group planned to oversee CQC action plan and compliance
	FOR DISCUSSION		FOR DISCUSSION
6	Restoration Activity Review was presented by Lynette Smith and progress to date was discussed along with revised plans. The significant associated risks were highlighted, particularly the uncertain effect of an increasingly likely upsurge in Covid related activity in the context of increasing concerns over staff morale and wellbeing evidenced by increased absence rates.	Board	Assurance: continued progress evident against plan : plan continuously reviewed and revised in light of changing guidance and productivity improvements by Care Groups Concerns: plans based on assumption of limited upsurge in Covid activity and risk which looks increasingly unlikely
6	Winter plan was presented by Melanie Liley and discussed. The plan outlined the multiple potential challenges faced this winter, including the likely surge in Covid activity, possible flu outbreak and potential issues arising from EU exit. Significant associated challenges include reduced options for planned reduction in routine activity as in previous years, the need to balance the risk of nosocomial CV19 transmission against the risk that demand on the reduced bed base will outstrip capacity and the growing concerns relating to staffing: low morale, increased sickness and absence as result of self or family isolation, unavailability of temporary staff etc.	Board	Assurance: lessons learnt from last years winter plan and review of the pandemic response have informed and been embedded in this plan. : operating under Command and Control structure to support rapid, clear and flexible decision making and risk management on a daily basis Concerns: workforce related issues most concerning potential risks to patient safety , performance against national targets and staff wellbeing

	FOR ACTION		FOR ACTION
7	Medical Appraisal and Revalidation Report was received on behalf of the Board. This will be shared with a higher level Responsible Officer and NHS England	Board	Recommended to approve

CHAIR'S LOG: Chair's Key Issues and Assurance Model

Committee/Group: Resources	Date: 22 September 2020	Chair: Lynne Mellor
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Agenda Item	Summary: Progress and issues	Receiving Body	For Recommendation or Assurance to the receiving body	
			Assurance	Concern/Recommendation
LLP Report(LLP)				
LLP1.	It is recognised that there is a focus on the KPIs and an improved level of transparency.	Board	Review of processes and systems underway.	There continues to be issues around the high risk areas for cleanliness, catering and grounds conditions and their deterioration is a cause for concern, particularly the impact to patients. 34 KPIs are unmeasurable and 32 of which are awaiting the implementation of a systems solution – this presents risk which needs mitigating Recommendation is for a mitigation plan to reduce the risk in the absence of the CAFM system and the other KPIs where there is currently no reporting to provide assurance action is being taken against the risks/issues. North Entrance at York site is a fire risk, the entrance needs to be cleared as a matter of urgency.
LLP2	Sickness continues to be an issue in the LLP particularly long term sickness	Board	Some improvement in sickness in Waste, Laundry and Linen.	Long terms sickness still an issue for the LLP – Board to review October/November if current action plans have resulted in an improvement.

Workforce (W)				
W1.	People plan issued in July 2020 with clear actions outlined for the Trust including meeting NHSE/I actions. Issues were discussed around payment for this plan	Board	An outline draft has already been made with a colour coding to address the actions. Progress will be presented back in January against these actions. Payment for the plan is expected to be via the Treasury.	Concern that some of the 'immediate asks' are unclear in the plan and the response. Recommendation: the Trust prioritises the key actions including the 'immediates' and applies timescales to when these are achievable in a plan.
W2.	Staff absenteeism – this has deteriorated over the last fortnight with a rise in COVID cases, with a total absence of over 400 staff across the Trust. Appraisals still behind where need to be	Board	Covid – assurance as swabbing re-introduced x 7 days a week for staff and turnaround of tests in 24 hours.	Concern over carers leave given schools sending students home, staff are having to take annual leave or in some cases unpaid leave. Concern appraisals at 36.3%, noted difficult situation with pandemic and second wave.
W3	Good progress noted - a)253 apprentices with over 50% of levy being used, and government funding being applied b) Ministry of Defence's Employers Recognition Scheme Gold Award – country's highest national honour for support of Britain's Armed forces for reservists and veterans taken a few years to achieve	Board	Oven-ready programme in place to take advantage of building the apprenticeship programme for York - 1 st cohort with Coventry in Sept started.	Recommendation: achievements recognised and noted.
Digital(D)				
D1	Noteworthy progress made with video consultations to treat patients during the pandemic.	Board	Assurance in Telemedicine in the Trust growing from 10 specialities to 52 with a rise from 150 hours to 450 hours of Telemedicine. DNA rates have reduced.	Recommendation: to see how the Telemedicine service could be rolled out to a further 100 specialities including high priority areas to reduce waiting lists such as ophthalmology and cardiology
D2	Roll out of N365 (NHS version of Office 365)	Board	Assurance consideration has been given to the structure of the rollout and licensing including staff training and optimal spend profile	Concern: Risks need mitigating around resourcing the rollout and management of the programme to gain business support for wrapping this up in a funded 'change management' programme of work. Staff training and support needs to be clear.

D3	Use of devices to keep relatives informed	Board/Quality Committee	IPADs/Devices were used on COVID wards during pandemic which provided patients and families the ability to communicate	Concern: the need to make available a facility for families/friends to contact patients on wards to see how they are progressing especially as COVID is on the rise and visits are reduced.
D4	CDIO initial findings focus on people, process and system improvements	Board	Assurance – initial findings highlight a good grasp of areas which need to be addressed with a plan	Concern: Budget available to fix the issues aligned to a clear set of business priorities with a case for change. A team to support the fix is needed to project manage .