

## **Minutes Board of Directors Meeting (Public) 24 May 2023**

Minutes of the Public Board of Directors meeting held on Wednesday 24 May 2023 in the Boardroom, Trust Headquarters, 2<sup>nd</sup> Floor Admin Block, York Hospital. The meeting commenced at 9:00am and concluded at 11:05am.

### **Members present:**

#### **Non-executive Directors**

- Mark Chamberlain (Interim Chair)
- Lynne Mellor
- Jim Dillon
- Denise McConnell
- Lorraine Boyd
- Steve Holmberg
- Jenny McAleese

#### **Stakeholder Non-Executive Director**

- Matt Morgan, Stakeholder Non-executive Director

#### **Executive Directors**

- Simon Morritt, Chief Executive
- Andrew Bertram, Deputy Chief Executive/Finance Director
- Heather McNair, Chief Nurse
- Polly McMeekin, Director of Workforce and Organisational Development
- James Hawkins, Chief Digital Information Officer
- Karen Stone, Medical Director
- Melanie Liley, Interim Chief Operating Officer

#### **Corporate Directors**

- Lucy Brown, Director of Communications

#### **In Attendance:**

- Mike Taylor, Associate Director of Corporate Governance
- Cheryl Gaynor, Corporate Governance Manager (Minute taker)

#### **Observers:**

- Emma Hardy – Member of the Public
- Maria Di Sciascio, Chief of Quality Control and Risk Management, Chieti, Italy
- Zaid Alnakeeb, Deputy Medical Director, Mallorca, Spain

This was the first meeting for Mark Chamberlain as the Interim Chair. Mark gave an overview of his background and his role as Member of Humber and North Yorkshire Integrated Care Board (a role in which he will be stepping down from during his Interim role with the Trust). Mark went on to share that patient care was his number one priority and the delivery of this coming from having excellent engaged staff who have the right

skills and tools to deliver this. Getting the culture and approach right from the Board in setting the tone and influencing the rest of the organisation.

The Chair welcomed everyone to the meeting.

#### **20 23/24 Apologies for absence**

No apologies received.

#### **21 23/24 Declaration of Interests**

There were no declarations of interest to note.

#### **22 23/24 Minutes of the meeting held on 26 April 2023**

The Board approved the minutes of the meeting held on 26 April 2023 as an accurate record of the meeting following an addition to minute 15 23/24 to be agreed outside the meeting.

#### **23 23/24 Matters arising from the minutes**

The Board noted the outstanding actions which were on track or in progress. Of particular note:

**BoD Pub 02** - Director of Workforce and Organisational Development to report back to a future Board meeting on education and training for managers in relation to practical support available and their responsibility to support team members with disabilities. Polly McMeekin updated that a reasonable adjustment report had been presented to the Executive Committee with specific recommendations around implementing reasonable adjustment approaches such as a policy, training for staff and also an equipment log/library for the digital team to expedite requests when related to reasonable adjustments. This action was now closed.

**BoD Pub 03** - Ellen Armistead to attend and present at an upcoming meeting of the Board of Directors. The Board noted the Ellen was scheduled to attend the private meeting but for personal reasons she was no longer available to attend. This would need to be rescheduled.

#### **24 23/24 Patient Story**

The Board welcomed Dr Jemimah Clarke to the meeting to present her son's (Jamie Clarke) experience whilst a patient at York Hospital. Jamie was admitted on Sunday 19 February with sepsis and was then transferred to ward 17. Dr Clarke described the care they had received from across all professions they had interacted with including doctors, nurses, surgeons, healthcare support workers, radiographers and imaging assistants, critical care outreach team to name but a few. Dr Clarke described that everyone had been amazing, caring, professional and helpful and without doubt worked above and beyond to ensure the best outcome for Jamie. Dr Clarke shared that she was aware of staff shortages in the Trusts but wanted to ensure that the Board heard that this was not evident throughout their stay. Jamie was since recovering well at home.

The Board took the time to thank Dr Clarke for attending the meeting and sharing her families experience, appreciating how challenging this will have been.

## 25 23/24 Chief Executive's Update

The Chief Executive presented his report to the Board and highlighted some key areas:

- BMA industrial action – Junior Doctor members of both the BMA and HCSA unions will walk out from 7:00am on Wednesday 14 June until 7:00am on Saturday 17 June 2023. Understand action will be taken every month until there is an agreement. Significant impact previously in particular on elective recovery. Hope to find a way forward
- Agenda for change pay award/settlement has been agreed
- Stepping down from NHS Level 3 incident
- Deescalating around mask wearing for visitors, patients and staff. Some exceptions, notably in areas with patients identified as being at high risk of severe Covid infection. People were welcome to continue to wear if they chose to do so
- Leadership changes within the North Yorkshire and Humber ICS:
  - Jonathan Lofthouse has been appointed Joint Chief Executive for Hull University Teaching Hospitals NHS Trust and Northern Lincolnshire and Goole NHS Foundation Trust.
  - Peter Reading will be joining Yorkshire Ambulance as Interim Chief Executive.
  - Jonathan Coulter has been appointed Chief Executive of Harrogate and District NHS Foundation Trust.
- Changes at Trust Board:
  - Interim Chair - Mark Chamberlain
  - Claire Hansen joins in July 2023 as Chief Operating Officer
  - Melanie Liley as Interim Chief Operating Officer will continue to support the leadership team in her capacity as Chief Allied Health Professional

## 26 23/24 Risk Management update – Corporate Risk Register

The Board received and noted the current Corporate Risk Register that were risks rated 15 or greater following a formal risk assessment process and consideration at the Risk Committee.

The Board noted three new risks that had been added following the May Risk Committee:

- Inability to deliver clinical services due to being unable to maintain the Trust estate and equipment
- Deteriorating patients
- Steam Mains at Scarborough General Hospital

## 27 23/24 Trust Priorities Report: Our People

Polly McMeekin described conversations previously at the People and Culture Assurance Committee around retention in general but particular in healthcare support workers. Polly went on to describe that during 2022 70 full time equivalents had left and when tracked, the reason being the pay differentials with bank incentives and flexibility which consequently really supported the Trust's priority to drive the agile and flexible working agenda, in particular within the nursing workforce.

Mark Chamberlain shared an experience with a logistics company who operate multiple shift patterns to accommodate different people as a result of struggling to recruit. He questioned whether it would be worth investigating something like this.

The Board concluded that the staff survey revealed that the flexible and agile working agenda was generally acceptable, but struggled in clinical areas. Staff shortages had led to anxiety among rota workers. Self-rostering had been successful, but staff shortages had

hindered progress. Exploring creative ways to work and exploring alternative Trusts was needed. Agile working was driving progress, but addressing pay and banding needed to consider the competitive market. The Board acknowledged that Strategic discussions were needed to address these issues and ensure a more equitable work environment.

**Action: Strategic Discussion for Board to include agile and flexible working**

**28 23/24 Workforce Race Equality Standard (WRES) Annual Report**

The Board received and noted the WRES Annual Report. Polly McMeekin discussed the national submission from August to the end of May, working with staff networks to co-develop the action plan. They identified a struggle in WRES, with 6 out of 9 metrics deteriorating. Metric 5 showed staff believe bullying was felt to be race related. Work was ongoing with the Head of Health and Safety to call out inappropriate behaviours from patient and service users.

Jenny McAleese asked about assurance for White non-British employees, but there is no national comparative. Matt Morgan discussed the timeline for actioning and the need to close the recruitment gap by next reporting. Lynne asked about PLACE support and connections for bullying and harassment, while Simon suggested a discussion with Jane Hazelgrave at ICB. Mark Chamberlain emphasised the importance of supporting staff and ensuring appropriate action.

**29 23/24 Workforce Disability Equality Standard (WDES) Annual Report**

The Board received and noted the WDES Annual Report. Polly McMeekin described an improving picture with ten metrics, six of which showing improvement. A staff network did exist but needed to develop some momentum.

**30 23/24 Nurse Staffing Report**

The Board received the report describing how the Trust had responded to provide the safest and effective nurse staffing levels during February and March 2023 and provided assurance that nursing establishments had been reviewed utilising best practice guidance and the arrangements for daily monitoring of patient safety and quality risks in relation to the workforce were in place. Heather McNair described that little had changed from the previous month. She highlighted a gap between temporary staffing and fill rates, advising that a monthly report will be presented on the impact of this gap.

Jenny McAleese suggested that night figures were better due to enhancements, but late shifts were not appealing. Heather suggested ensuring full establishments at night to fill deficits, as other workforce filled them in the day. Denise McConnell questioned the establishment figures based on the plan, as they were consistent in March, April and May. Heather described that the report included the March figures and the plan was not signed off, once it was, the vacancy gap would become bigger and the establishment figures would then reflect the capital plan.

**31 23/24 People & Culture Assurance Committee**

Chair of People and Culture Assurance Committee Jim Dillon raised the Committee issue of electronic rostering for ward-based staff, which was part of the NHS's approved process. An imminent report from NHS England would support discussions on this issue. Jim highlighted that the costs of having an appropriate system may require significant investment, and the Board should take these concerns seriously. The lack of resources in

the new rostering team and the difficulty of fully rolling out eRostering across the entire workforce were challenges. The NHS England report should be revisited through the Executive Committee to identify necessary changes to the Board. Andrew Bertram emphasised the importance of benefits realisation and costing in this process.

**Action: Delegation to the Executive Committee - Workforce planning and resource management in relation to an effective e-rostering facility and consideration given to the acquisition and implementation of suitable e-rostering system. An outcome report to return to the Board.**

### **32 23/24 Trust Priorities Report: Quality & Safety**

The Board received and noted the quality and safety update.

### **33 23/24 CQC Update**

The Board received and noted the updated position to the action being taken to address the CQC regulatory conditions.

The Board noted on 21 April 2023 the Maternity action plan, in response to the section 31 warning notice, was submitted in line with CQC requirements.

Five CQC enquires had been received in May 2023. These were detailed in the main body of the report.

Mark Chamberlain emphasised the importance of discussing outcomes, while Steve Holmberg described the struggle for the Quality and Safety Assurance committee to obtain any assurance up to now. Melanie Liley acknowledged the wider NHS system recognition and input of their contribution of the impact and outcomes of this.

### **34 23/24 Ockenden Report Update**

Sue Glendenning, Interim Care Group Director of Midwifery prepared and presented the report and summarised the key points highlighted in the main body of the report.

Steve Holmberg discussed the new report format and positive steps taken to provide assurance however, the saving babies lives results were disturbing and the Quality and Safety Assurance Committee had asked the team to go back and look into that in detail.

Denise McConnell discussed the summary of maternity services and the need for a report on progress and training targets. Steve mentioned that similar training compliance figures were seen across the Trust. Karen Stone mentioned the need for more training for maternity, as there was a mix of issues such as time to take the training. Andrew Bertram mentioned the sustaining training section and resource issues, stating that funding cannot be the barrier. Polly McMeekin discussed the care groups' prioritisations in relation to their resources and noted that the learning hub system being unavailable for a period of time. Mark Chamberlain emphasised the importance of training for maternity and the Board-level message of training. Each care group received their training KPI's, and Managers were able to link into the learning hub to see where their staff are. Steve suggested a "mandatory training month" or something similar, which Simon Morrill agreed to look into. Simon Morrill acknowledged longstanding issues with clinical staff and suggested a timescale for improvement would be helpful. Karen suggested engagement with clinicians and mandatory training should be included in appraisals, with progress visible over the next year.

Mark highlighted the importance of accreditation and the risks associated with delays in scanning. Lorraine suggested emphasis on professionalism and training being a requirement of professional status. Lorraine also highlighted the importance of risk and that the Board were sighted on compliance with saving babies' lives (improvement team were now working on and supporting that) and the delays in scanning too, noting the risks associated with that. The Board needed to be aware of this being outside of the national standard.

The Board were clear that training and compliance was really important and wanted to support the staff in working on this and doing the right thing by professionalism. The Board requested that Sue reports back on progress to a future meeting of the Board.

**Action:**

- **Staff Training - supporting to improve the training and compliance in particular in maternity, the Board suggested a 'mandatory training month' initiative or similar and a key message from the Executive Team around professional responsibility in compliance. The Chief Executive agreed to follow up and consider an approach.**
- **Saving Babies' Lives V2 - To report back to the Board on progress**
- **Ultrasound in Maternity - Report back to the Board on progress**

### **35 23/24 Quality and Safety Assurance Committee**

The Board received an update from the Chair of the Quality and Safety Assurance Committee, Steve Holmberg. Steve raised concerns about the fragility of some services and the need to improve delivery across all sites. Hospital Associated Infections - there were still concerns and not assurance. Heather McNair highlighted the need for significant improvement in investments this year in particular around IPC.

Mark Chamberlain requested Steve to provide a written list of key priorities of the Board in understanding where they are around quality and Safety.

Steve also suggested that risks were held by the lead executives and that the Board should tease out risks that don't necessarily come directly to the Quality and Safety Assurance Committee. The Board agreed that siloing risks into specific sub committees was not sensible.

There were no further challenges or comments of note.

**Action:**

- **Steve Holmberg - Provide a written report of significant concerns discussed at the Committee to raise for discussion and action with the Board**
- **All committees to be sighted on all risks that are reported including those outside of Executive Lead relevant to the committee portfolio**

### **36 23/24 Trust Priorities Report: Elective Recovery and Acute Flow**

The Board received and noted the performance relating to elective recovery and acute flow. Melanie Liley highlighted that the Covid-19 position had seen a downward trend with 78 patients, reflecting the national position. Acute flow had seen improvements, such as ambulance turnaround. The Emergency Care System (ECS) trajectory had been achieved at 76%. New metrics for each project within the UEC Programme, will be reported from next month once April data was available and routinely included in this report going forward.

The Board noted that the Trust had received a formal request from the Integrated Care Board to be the Prime Provider for Integrated Urgent Care services across the Trust's geographical footprint commencing 1st October 2023, subject to due diligence from both parties. The Trust was working through the due diligence and identifying risks and opportunities, a detailed business case was to be presented at July Board.

The Board also noted the work of the community response team in relation to Transfer of Care, one key area of focus is the expansion of the Community response team for York. The Community Response Teams were a multi-disciplinary service of health care professionals providing assessment, intervention, rehabilitation and reablement for patients within their own homes, supporting admission avoidance and facilitating timely hospital discharges from Acute Hospital. The Board recognised the importance of understanding the population in the Trust's community around learning difficulties. The Data Quality Committee had discussed steps to address disability data groups, and Melanie agreed to evaluate how the data would be applied to other working groups.

The Board noted the update report.

### **37 23/24 Digital, Performance and Finance Assurance Committee**

The Board received an update from the Chair of the Digital, Performance and Finance Assurance Committee, Lynne Mellor. Lynne shared some of the discussions that the Committee had covered such as the key implementation of the EPR system, performance, and financial challenges. The Committee discussed the benefits and associated costs of the system, which will be a transformative change enabler. The Board was asked to consider the EPR case at its private meeting to then consider the case and all that surrounds it and as part of the strategy session, specifically talking about transformative change of which this EPR will support.

Lynne discussed the performance of the Trust in addressing the elective backlog and RTT waiting list. She emphasised previous committee discussions on strategic actions to overcome these challenges. Melanie Liley acknowledged the growth of the RTT backlog and the pandemic's impact on the position. Trust programs aimed to improve this position. Committees were discussing strategic approaches with system partners to balance the Trust's priorities of acute flow, elective recovery, and its financial challenges. Lynne assured the Board that the Committee was overseeing a number of deep dives planned.

### **38 23/24 Finance Update**

The Board received and noted the income and expenditure Trust position, Andrew Bertram highlighted that the Trust

The plan for 2023-24 aimed to deliver a £15.4m deficit, with a £3.6m deficit driven by staffing and the efficiency program. The organisation was £1m adrift at the end of month 1, but this was likely to change. The CIP ask was over £21m (£21.4), and the gap position would close in the plan. The ICB had a total of £17.5m cost saving requests, with £7.4m identified. A significant contribution was made by elective work and switching follow-up resources to invest elsewhere. There were no cash issues to raise with the Board. Denise McConnell suggested putting together a key variances table to see the difference in productivity. Mark Chamberlain enquired about staff awareness of financials and was subsequently assured that key messages were delivered through staff briefs with a focus on working within the resource envelope.

### **39 23/24      Any Other Business**

#### Research and Development

Lynne Mellor raised reporting of Research and Development to the Board and suggested that this be reinstated as a regular update. This was subsequently agreed.

**Action: Associate Director of Corporate Governance - Return research and development reporting into the Board agenda**

#### Question from Member of the Public

Emma Hardy attended the Board meeting to ask the Board about the Trust's Eliminating Mixed Sex Accommodation (EMSA) Policy and why the Trust had adopted gender self-identification instead of the protected characteristic of biological sex to provide single-sex spaces. Emma asked for the Board to explain how this policy had balanced the needs of other protected groups. Heather McNair responded acknowledging that the Trust has a duty to safeguard its staff and patients and national guidance is followed. The Trust's Head of Equality, Diversity and Inclusion had already invited Emma to be part of the review of the Trust Policy. Mark Chamberlain confirmed that by virtue the Board would respond and involve Emma in the process and acknowledged that the Board needed to consider the issues.

**Action: Review of Eliminating Mixed Sex Accommodation (EMSA) Policy**

### **40 23/24      Time and Date of next meeting**

The next public meeting of the Board of Directors will be held on 26 July 2023.