

Confirmed Minutes - Council Of Governors Meeting

Date	Thursday 20 October 2022	Time	15:30 – 17:30
Venue	Virtual	Chair	Dr Maxwell Mclean, Chairman
Present	<ul style="list-style-type: none"> - Dr Maxwell Mclean, Chairman (MM) - Professor Alastair Goldman, Partner Governor, University Of Bradford (AG) - Mr David Wilmshurst, Public Governor, Shipley (DW) - Mr Dermot Bolton, Public Governor, Bradford West (DB) - Mr Ibrar Hussain, Public Governor, Bradford West (IH) - Mr Mark Chambers, Patient Governor (MC) - Mr Khalid Choudhry, Public Governor, Keighley (KC) - Mrs Heather Jacklin, Public Governor, Bradford East (HJ) - Mr John Bolton, Staff Governor, Medical & Dental (JB) - Ms Raquel Licas, Staff Governor, Nursing & Midwifery (RL) - Ms Helen Wilson, Staff Governor, AHP (HW) - Mr Adrian Cresswell, Public Governor, Bradford South (AC) - Councillor Fozia Shaheen, Partner Governor, Bradford Metropolitan District Council (FS)(left the meeting at 16:10) 		
In attendance	<p>Non-Executive Directors</p> <ul style="list-style-type: none"> - Mr Mohammed Hussain, Non-Executive Director (MHu) - Mr Altaf Sadique, Non-Executive Director (AS) - Mrs Karen Walker, Non-Executive Director (KW) - Mr Jon Prashar, Non-Executive Director (JP) - Professor Janet Hirst, Non-Executive Director (JH) - Mrs Julie Lawreniuk, Non-Executive Director (JL) - Ms Sughra Nazir, Non-Executive Director (SN) - Mr Barrie Senior, Non-Executive Director (BAS) <p>Executive Directors</p> <ul style="list-style-type: none"> - Professor Mel Pickup, Chief Executive (MP) - Mr Matthew Horner, Director Of Finance (MH) - Ms Pat Campbell, Director Of Human Resources (PC) - Professor Karen Dawber, Chief Nurse (KD) - Dr Ray Smith, Chief Medical Officer (RS) - Dr Paul Rice, Chief Digital & Information Officer (PR) - Mr John Holden, Director Of Strategy and Integration/Deputy Chief Executive (JH) - Mr Mark Holloway, Director of Estates & Facilities (MHol) - Mr Sajid Azeb, Chief Operating Officer/Deputy Chief Executive (SA) <p>Corporate Governance Team</p> <ul style="list-style-type: none"> - Ms Laura Parsons, Associate Director Of Corporate Governance/Board Secretary (LP) - Ms Jacqui Maurice, Head Of Corporate Governance (JM) - Ms Katie Shepherd, Corporate Governance Manager (KS) <p>External Auditor</p> <ul style="list-style-type: none"> - Mr Nick Rayner, Deloitte LLP, for agenda item CGo.10.22.10 (NR) 		
Observer			

No.	Agenda Item	Actions
CGo.10.22.0	<p>Chair's opening remarks</p> <p>Dr Maxwell Mclean, Chairman (MM), welcomed all to the meeting particularly Councillor Fozia Shaheen who had been appointed by</p>	

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	Bradford Metropolitan District Council.	
CGo.10.22.1	Apologies for Absence The following apologies were noted: <ul style="list-style-type: none"> • Ms Ruth Wood, Staff Governor, All Other Staff Groups • Professor Anne Forster, Partner Governor, University of Leeds • Ms Caroline Chapman, Public Governor, Shipley 	
CGo.10.22.2	Declarations of Interest There was nothing declared.	
CGo.10.22.3	Minutes of the meeting held on 24 July 2022 The previous minutes were accepted as a correct record.	
CGo.10.22.4	Matters Arising MM referred to the action log appended to the minutes. The status of the following actions were confirmed by the Council: <ul style="list-style-type: none"> • <u>CG22005 Chairman's Report: Health watch item deferred to January 2023 meeting. Action to remain open.</u> • <u>CG22010 Summary of the pre meeting with NEDs: Report on staff survey action plans presented to Academy and Board. Action closed.</u> • <u>CG22011 Summary of the pre meeting with NEDs: A patient experience briefing will be included as the special Executive briefing in the Autumn bulletin for the Governors and subsequently in the Autumn bulletin for Members. The Board Secretary has met with the Chief Operating Officer and a session on performance will be scheduled for the Council early in 2023. Action to remain open.</u> • <u>CG22012 CEO Update: Covid update emails reinstated for Governors. Action closed.</u> • <u>CG22013 Governors Statutory Duties in light of emerging Health & Care Partnerships: Invitation has been extended to the Airedale NHSFT and Bradford District Care Trust NHSFT to see if there is an appetite for a joint session. Awaiting response. Action to remain open.</u> • <u>CG22014 Quoracy of meeting: Required approvals received via email. Action closed.</u> 	
CGo.10.22.5	Summary of the pre-meeting with Non-Executive Directors (NEDs) MM advised of the discussion held between NEDs and Governors prior to this meeting. Discussion took place with regard to the People, Quality & Patient Safety and, Finance & Performance Academies. Key points noted from the discussions held were: <u>Finance & Performance Academy:</u> JL and SA provided an update of the evidence of impact of the Trust Command Centre and confirmed that it provides visualisation of information and data relating to improvements. The following key headlines were noted: <ul style="list-style-type: none"> • Limiting Covid spread and showing the hotspots for Covid to enable BTHFT to intervene. • There are 150 to 200 fewer calls asking for information which is now captured in the Command Centre. 	

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	<ul style="list-style-type: none"> • Tiles continue to be rolled out and this contributes to improved performance. • The Trust was previously ranked 87th in regard to urgent care prior to the Command Centre being implemented. We have now moved to 5th nationally. Showing clear improvement regionally and nationally with a rating of 13th out of 116 in urgent care. • Our performance with regard to the Cancer targets is showing good improvement when benchmarked against other organisations. • The Command Centre is supporting the Clinical Service Units (CSUs) to track and deliver improvements which they report on through the relevant Academies. • A formal process is in place to track and review business cases post-implementation. • We are the only Trust in England that is partnered with GE Healthcare Command Centres. <p>JL discussed how all three Academies consider options for tracking the benefits from programmes, measure improvement and share learning with each other. Action JL also agreed to provide a more detailed update on the work of the F&P Academy at the January 2023 meeting.</p> <p>Action MM requested that Governors were provided with two or three actual examples of improved Trust performance due to the impact or intervention of the Command Centre.</p> <p><u>People Academy:</u></p> <ul style="list-style-type: none"> • <u>National GMC work life balance survey.</u> RS provided a brief summary in relation to the national General Medical Council (GMC) work/life balance survey for junior doctors undertaken between March-May 2022. The response rate for Bradford was 80% and we are confident that the responses reflect staff experiences. RS provided further details on the ranking metrics for Mental Health and Acute Trusts in the North of England. Our ranking of 63 out of 63 does not relate to the quality of experience but the business and workload in our incredibly busy hospital which is perceived to be the busiest hospital in the North of England by trainees. RS gave an overview of the 18 domains within the survey and confirmed that we are around the median for each domain with an improved position since the previous survey undertaken in 2021. We are shown to be a positive outlier in A&E, Anaesthetics and GP trainees. An action plan for those areas needing improvement has been implemented with the Education Department working alongside the CSUs and the specialty college tutors. • <u>Pay award ballot and the impact on staff.</u> PC provided an update on the current RCN ballot on strike action. The ballot remains open until 2nd November 2022 and action could take place at any time between 18 November 2022 and 2 May 2023. We have approximately 1,100 RCN members. Strike action will be targeting non urgent care. The UNISON ballot opens on 27 October 2022 for 4 weeks. Action could take place at any time in the six months from 9 December 2022. We have approximately 1000 members in the Trust eligible to vote. Two weeks' notice is given of any industrial action due to take place and our Trust plans are currently being revised. There is a possibility that three separate unions could be striking on the same dates starting in 	<p>Non-Exec Director (JL) CG22015</p> <p>Chief Operating Officer CG22016</p>

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	<p>December 2022.</p> <ul style="list-style-type: none"> <u>Vacancies and sickness absence.</u> KW provided an update around the low vacancy rates within the Trusts Allied Health Professional (AHP) teams comprising 433 registered AHPs and 143 AHP support workers. To combat the recruitment difficulties the priorities have focussed on maximising retention, developing the support workers career pathways and promotion of the apprenticeship programme and international recruitment. <p>KW commented on the 20 vacancies across the pharmacy department as at May where recruitment has become more challenging. There are plans in place to increase morale and recruitment and retention. Turnover currently sits at 13.8% and short term sickness at 6.25%. The Trust is working to mitigate sickness with several initiatives available to staff. Three audits had recently concluded – two of which received significant assurance; Erostering of Junior Doctor's and, Recruitment and Retention. The Safer Staffing Board Assurance Framework update received a high level assurance. Assurance is also received via the People Academy from the Guardian of Safe Working Hours for doctors and dentists in training report, the Staff Survey, Freedom to Speak Up (FTSU) report and staffing and workforce plans.</p> <ul style="list-style-type: none"> <u>Research:</u> MM confirmed that the Trust was successful in retaining the Yorkshire and Humber Patient Safety Research Centre for a further five years. MP provided an update on the bid for Health Inequalities funding between the Council, academic institutions and the Bradford Institute of Health Research to look at the wider determinants of health and the impacts on inequalities. Action LP agreed to arrange for a briefing to be provided to governors regarding the funding received and BTHFT's role in relation to this. <p><u>Quality & Patient Safety Academy:</u> <u>Reported stillbirths.</u> There were six reported stillbirths in August 2022. Action MM requested that further detailed information on this area be provided to Governors by the Chief Nurse.</p> <p>The Council noted the verbal update.</p>	<p>Board Secretary CG22017</p> <p>Chief Nurse CG22018</p>
CGo.10.22.6	<p>Matters raised with Governors by members, patients and the public There were no matters raised.</p>	
CGo.10.22.7	<p>Chairman's Report MM stated that the report should be taken as read. However he asked the Governors to note the following key points:</p> <ul style="list-style-type: none"> Raquel Licas, Staff Governor has joined the Governors Nominations and Remuneration Committee (NRC). The AGM/AMM takes place on the 31 October 2022 and all are encouraged to attend. The paper and link relating to the new Bradford Children and Families Trust Board Command Centre information provided by Paul Rice, Chief Digital and Information Officer Consideration for the potential for exploring and commissioning some wider research into stillbirths in Bradford with the Research team and 	

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	<p>clinical staff.</p> <ul style="list-style-type: none"> MM to chair the West Yorkshire Association of Acute Trusts Committee in Common meetings. <p>The Council noted the report.</p>	

CGo.10.22.8	<p>CEO update</p> <p>Mel Pickup, Chief Executive (MP) provided a report to the Council which highlighted the following:</p> <ul style="list-style-type: none"> Work continues to address the number of patients who are waiting exceptionally long periods of time. The first target was to achieve 'no patients waiting more than 104 weeks' by the end of September. There were a few patients from that cohort who chose not to take up the offer of treatment on the date offered. Therefore in October three patients were identified as waiting more than 104 weeks. It is expected that they will have received their treatment by the end of October. The next planned milestones for achievement are the reduction of patients waiting longer than 78 weeks and then 52 weeks. Improvement trajectories have been set which are on target. To date the overall waiting list has increased due to the re-start of activity and increasing referrals from primary care. Efforts remain focussed on the clinical prioritisation of patients. There has been an increase in the number of COVID patients and patients with other respiratory conditions. This is expected as we move into the winter period. The Trust has experienced high levels of A&E attenders; over 400 per day with a peak of 450 yesterday, which is having an impact on operations for elective patients due to lack of bed availability as a result of A&E patients that need to be admitted to wards. A bid has been submitted to the Department of Health for additional capital monies to establish an elective operating hub at St Luke's Hospital which would provide a complete separation of elective and urgent care. It has been confirmed that we will receive £15m of targeted investment funds to create that additional elective capacity which will provide a day case centre to cover 80% of our day cases with the more complex and urgent work requiring admission to BRI. We are aiming for this to be completed and operational by Q4 of 2023. The winter planning process is underway and the Trust is awaiting confirmation of where the £500m of social care funding will be targeted with the hope that some is received into our place to expedite the growing number of patients who are waiting for discharge - although figures for our Trust are comparably low when benchmarked regionally and nationally. Our local authority has signalled that there has been a significant over spend in this financial year which may have an impact on some of the services offered. This could potentially threaten our ability to keep patients moving through the system. There are concerns around the resilience of ambulance services some of which is compounded to by the inability of A&E departments to offload patients in a timely manner when they arrive at the hospital. This will be monitored on a regular basis with a report to the Board on ambulance handover times and the agreed trajectory for improvement. COVID patient numbers to date are 49 against 57 recorded the 	
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	<p>previous week. The COVID booster and flu booster season has started and the intention is to offer the double vaccination to all staff eligible including all front line staff.</p> <ul style="list-style-type: none"> • The new CSU structure was implemented on the 5th September which has replaced (and reduced) the overall number of the former Clinical Business Units (CBUs). Each new CSU has a team of HR business partners, finance business partners and people who are expert in improvement and risk management. The CSUs will over time become more autonomous and have greater authority to make some of their own decisions and steer future developments. • This month our Renal Shared Care Haemodialysis Facility opened funded by a large donation from Sovereign Healthcare and some of the Trust's own capital finance. The facility will empower those patients with renal failure to perform their own dialysis in our unit, or at home, with guidance from Trust staff. • A Filipino Appreciation day took place on the 12 October at BRI to acknowledge the incredible contributions our Filipino staff have made to the life of this hospital and to the care of our patients. • During the following week stands focussed on Black History Month and Freedom to Speak Up were also featured on the concourse. Their shared theme was inclusion. • The Trust's first awards dinner, the Razzle Dazzle Ball, took place on 14th October. Fourteen nominations were received for five awards and the event was a huge success. • The second Bradford District and Craven Health and Care Partnership Board meeting took place on the 29th September and the next one is due to take place in November. <p>MM thanked the Chief Executive for her verbal update.</p>	
CGo.10.22.9	<p>Bradford District & Craven Citizens' Panel</p> <p>This item was deferred to the January 2023 Council of Governors meeting.</p>	
CGo.10.22.10	<p>External Auditor Report (Annual Report and Accounts)</p> <p>NR provided an overview of the slides presented which highlighted the work undertaken by Deloitte in 2022. The Council discussed and noted the following:</p> <ul style="list-style-type: none"> • BTHFT had received an unqualified opinion on the trust financial statements with no issues identified with the annual governance statement. • Deloitte LLP had certified that they have completed the Trust's audit for 2021/22 • One recommendation was raised around the authorisation and review processes for journals. • 'Accounting for capital expenditure' identified a couple of adjustments in relation to the amount that the Trust had recognised as additions in year as some related to projects that were still on-going. In conclusion the adjustments were identified as material and didn't prevent us having a clean audit opinion in relation to the financial statements. • Value for Money work focusses on the appropriate processes, information processing, reporting and monitoring to deliver good governance in the areas relating to financial sustainability, governance and improving economy, efficiency and effectiveness. One recommendation relating to the financial sustainability area was to 	

	<p>focus on delivering recurrent savings going forward.</p> <p>BAS and MH concurred that this was a pleasing set of results.</p> <p>The Council noted the paper.</p>	
CGo.10.22.11	<p>Delivery of FT Membership Plan</p> <p>LP requested that the report be taken as read with the following key points highlighted:</p> <ul style="list-style-type: none"> • The membership plan was approved by the Board in November 2021 following review by the Council in October 2021. • The three broad themes of the plan which covered; engagement, communications and recruitment. • The establishment of the Membership Plan Delivery Group to oversee the delivery of the plan. The group had met three times and set the following targets for the first year: <ul style="list-style-type: none"> - increase the number of email addresses of members: - to recruit 100 new members in Keighley, and - recruit 100 new members aged between 16-22 <p>Governors noted in particular the increase in communications to members and, the targeted communications relating to - recruiting staff governor; the large scale mailing to members with no email address and; the development of a governor toolkit to support our governors in engaging with members and the public. LP added that other governors wishing to join the membership plan group would be welcome and should contact the Corporate Governance team if interested.</p> <p>The Council noted the report.</p>	
CGo.10.22.12	<p>Governors Nominations & Remuneration Committee (NRC) Report</p> <p>DB asked that the paper be taken as read. The paper reported on the items considered at the NRC meeting held on 10 October 2022. He confirmed that the NRC had received information and data to support the NED/Chair remuneration recommendation which would be discussed further at the closed meeting.</p> <p>The Council noted the report.</p>	
CGo.10.22.13	<p>Outcome of the NED Appraisals Process</p> <p>MM asked that the paper be taken as read and further assured the Council that the NED appraisal process has been undertaken in line with the process agreed by the Council. MM referred to the aim to articulate and record the impact that NEDs have within the Trust. MM advised the Council that a report on the impacts of NEDs would be received by the Governors NRC at their next meeting.</p> <p>The Council noted the report.</p>	
CGo.10.22.14	<p>Reports from the Board</p> <p>The Council took the reports as read. In addition, with regard to the Audit Committee Chair report, BAS highlighted reference to the strong Internal Audit results that had been achieved providing good assurance. BAS also asked the Council to note the improvements to the corporate governance and risk management assurance arrangements alongside the new:-</p>	

	<ul style="list-style-type: none"> • risks management strategy; • board assurance framework, and • assurance map. <p>The Council noted the report.</p>	
CGo.10.22.15	Any Other Business There was no other business to discuss.	
CGo.10.22.16	Review of meeting There were no comments provided.	
CGo.10.22.17	Date and time of next meetings Thursday, 26 January 2023, 3.30-5.30pm (venue TBC)	
CGo.10.22.18	Resolution to move into closed session	

Actions from the Council of Governors meeting held 20 October 2022

Date of Meeting	Action log ID	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
28.4.22	CG22005	CGo.4.22.7	Chairman's Report Helen Rushworth from Healthwatch would be invited to speak to governors about the role of the citizen panel.	Head of Corporate Governance	January 2023	5.12.22 – Helen Rushworth confirmed to attend the January meeting – <u>Action closed</u> 20.10.22 item deferred to January 2023 meeting. Action to remain open Helen Rushworth has confirmed that she will attend the October Council meeting. Item included on the agenda. <u>Action closed</u> .
21.7.22	CG22011	CGo.7.22.5	Summary of the pre-meeting with Non-Executive Directors (NEDs) KD suggested the Patient Experience team are invited to present an Executive Briefing session for Governors. It was agreed that this would be considered. LP further informed the Council that she was discussing the key areas of interest picked up through the governor's evaluation survey with SA and will ensure urgent care and a briefing to Governors is included as part of that discussion.	Board Secretary	January 2023	A patient experience briefing will be included as the special Executive briefing in the Autumn Bulletin for the Governors and subsequently in the Autumn bulletin for Members - publication is expected before the end of October. The Board Secretary has met with the Chief Operating Officer and a session will be scheduled for the Council early in 2023. <u>Action to remain open</u>
21.7.22	CG22013	CGo.7.22.9	Governors Statutory Duties in light of emerging Health & Care partnerships JM agreed to discuss with LP the feasibility of a joint session with Airedale and Bradford District Care Trust being arranged.	Head of Corporate Governance	January 2023	An invitation has been extended to the Airedale NHSFT and Bradford District Care trust NHSFT to see if there is an appetite for a joint session. All respective Trusts have now confirmed that there is an appetite

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						to hold such a session. A planning session is currently being arranged to include the Chairs and Board Secretaries to develop the agenda and confirm the time frame for delivery. <u>Action closed.</u>
20.10.22	CG22015	CGo.10.22.5	Summary of pre meeting with NEDs JL to provide a more detailed update on the work of the F&P Academy at the January 2023 meeting	Non-Executive Director (JL)	January 2023	Verbal update to be provided at the NED & Governor pre meeting in January <u>Action closed</u>
20.10.22	CG22016	CGo.10.22.5	Summary of pre meeting with NEDs MM requested that Governors were provided with two or three actual examples of improved Trust performance due to the impact or intervention of the Command Centre.	Chief Operating Officer	January 2023	Response provided has been appended to these minutes at Appendix 1. <u>Action closed.</u>
20.10.22	CG22017	CGo.10.22.5	Summary of pre meeting with NEDs LP agreed to arrange for a briefing to be provided to governors regarding the health determinants research funding and BTHFT's role in relation to this.	Board Secretary	January 2023	Briefing provided to Governors via email on 28.11.22 <u>Action closed</u>
20.10.22	CG22018	CGo.10.22.5	Summary of pre meeting with NEDs There were six reported stillbirths in August 2022. Further detailed information to be provided to Governors by the Chief Nurse.	Chief Nurse	January 2023	A standalone session has been arranged for governors on 24 January 2023 <u>Action closed</u>

Appendix 1

Update with regard to Action CG22016

'Provision of two or three actual examples of improved Trust performance due to the impact or intervention of the Command Centre'.

Patient deterioration

- Utilised by Critical Care Outreach Team to pro-actively pick up patients acutely deteriorating whereas prior to this tile they would be aware of patients once referred by the relevant clinical area
- Utilised by the Command Centre team who use it to monitor acuity versus nurse staffing when looking at patient placement
- Utilised by the nurse in charge who can see an overview of the clinical picture for their entire ward and can work with named nurses and Health Care Support Workers (HCSW) to ensure timely escalation of the acutely unwell patient

ED Expediter

- Provides the Emergency Department (ED) team with a clear overview of their department including number of patients per area, allowing for regular review by both the nurse and doctor in charge to ensure timely re-allocation of staff to the most required areas
- Provides the command centre and operational teams with a concise overview of the Emergency department; patients per area, patients in the ambulance area, number of bed requests, number waiting for imaging, length of stay and an overall pressure score for the department – used for the twice daily operational site meetings to update all Clinical Service Unit (CSU) representatives present with an accurate ED position (supporting speciality in-reach escalations)

Transfer List

- Provides the command centre team with an “at a glance” overview of all patients who require movement from ED to an assessment ward, assessment ward to a downstream bed, downstream ward to downstream ward where taken over by another speciality, critical care to a step down ward, unexpected theatre patients requiring an escalation bed, patients referred by General Practitioners (GP's) for Same Day Emergency Care (SDEC) or admission, patients accepted for medical repatriation to BTHFT, plus patients requiring admission coming from areas such as Outpatient Departments (OPD), hot clinics or acute oncology/dialysis

Patient Manager

- Overview of every in-patient including
 - Admission date
 - Expected Date of Discharge
 - Medically Optimised for Discharge Date
 - Responsible Clinician
 - Flags & alerts
 - Covid status (where appropriate)
 - Outstanding/pending tasks
 - Completed tasks

End