

## BOARD OF DIRECTORS OPEN MEETING MINUTES, ACTIONS & DECISIONS

At a scheduled meeting in public of the Board of Directors of Bradford Teaching Hospital on the 20<sup>th</sup> of January 2022, with Dr Maxwell Mclean in the Chair and Laura Parsons as Trust Secretary, the minutes of the previous meeting on the 18<sup>th</sup> November 2021 were read and approved.

Signed: \_\_\_\_\_  
Chairperson

Signed: \_\_\_\_\_  
Trust Secretary

In light of the Government restrictions to groups of people meeting, our meeting of the Board of Directors took place virtually, and was not open to the public. The agenda and papers were available on our website and a mechanism was put in place for to enable feedback in relation to their content.

<b>Date:</b>	Thursday 20 January 2022	<b>Time:</b>	09:30-12:00
<b>Venue:</b>	Virtual Meeting Via Microsoft Teams	<b>Chair:</b>	Dr Maxwell Mclean
<b>Present:</b>	<p><b>Non-Executive Directors:</b></p> <ul style="list-style-type: none"> <li>- Dr Maxwell Mclean (MM)</li> <li>- Professor Janet Hirst (JHi)</li> <li>- Mr Mohammed Hussain (MHu)</li> <li>- Ms Julie Lawreniuk (JL)</li> <li>- Ms Sughra Nazir (SN)</li> <li>- Mr Jon Prashar (JP) from 11am</li> <li>- Mr Altaf Sadique (AS)</li> <li>- Mr Barrie Senior (BAS)</li> <li>- Ms Karen Walker (KW)</li> </ul> <p><b>Executive Directors:</b></p> <ul style="list-style-type: none"> <li>- Professor Mel Pickup, Chief Executive (MP)</li> <li>- Mr Sajid Azeb, Chief Operating Officer (SA)</li> <li>- Ms Karen Dawber, Chief Nurse (KD)</li> <li>- Mr John Holden, Director of Strategy &amp; Integration (JH)</li> <li>- Matthew Horner, Director of Finance (MH)</li> <li>- Dr Ray Smith, Chief Medical Officer (RS)</li> </ul>		
<b>In Attendance:</b>	<ul style="list-style-type: none"> <li>- Ms Pat Campbell, Director of Human Resources (PC)</li> <li>- Mr Mark Holloway, Director of Estates &amp; Facilities (MHo)</li> <li>- Dr Paul Rice, Chief Digital and Information Officer (PR) from 10.30am</li> <li>- Ms Sara Hollins, Director of Midwifery (SH) for Bo.1.22.16 – Maternity Services Update</li> <li>- Laura Parsons, Trust Secretary/Associate Director of Corporate Governance (LP)</li> <li>- Ms Katie Shepherd, Corporate Governance Manager (KS)</li> </ul>		
<b>Observers:</b>	<ul style="list-style-type: none"> <li>- Dr Jamilla Hussain, NIHR Clinical Lecturer in Palliative Medicine – Bradford Institute for Health Research &amp; Wolfson Palliative Care Research Centre to 11am</li> <li>- Virginia Mason, Senior Communications Officer (VM)</li> </ul>		

No.	Agenda Item	Action
<b>Section 4c: Quality</b>		
<b>Bo.1.22.12</b>	<b>Maternity Services Update</b>	

No.	Agenda Item	Action
	<p>MM welcomed Sara Hollins (SH), Directory of Midwifery to the meeting. SH presented the November and December update and made the following key points:</p> <ul style="list-style-type: none"> <li>- SH reported that there has been a reduction of stillbirths in 2021 compared to 2020 and a slight increase in birth rate. A total of five stillbirths were reported for November and December bringing the total for 2021 to 25 which is a reduction on the 35 reported the previous year. The service will continue to improve the stillbirth rate by ensuring that local and national guidance is followed and embedded in practice.</li> <li>- One baby was treated for Hypoxic Ischaemic Encephalopathy (HIE) in November and sadly died as a result of this.</li> <li>- There were four neonatal deaths in November and three in December. Out of these seven deaths, three were anticipated as the babies were either extremely premature or had a life limiting condition. <b>Three-Two of the deaths were due to the Klebsiella outbreak, of which two both were very premature babies.</b> During November the Bradford Registrar for Births and Death escalated a perceived increase in the number of neonatal deaths reported. On investigation this increase was partially attributed to an increase in the number of non-viable babies who showed signs of life prior to death within a few hours. Legally, these babies are registered as a live birth and death even though the gestation at birth is non-viable.</li> <li>- SH referred to Appendix 2, Perinatal Mortality Review Tool (PMRT) position which provides the quarterly update as part of Safety Action 1 of the Maternity Incentive Scheme. SH was pleased to report that some standards have been met and the remaining will be achieved by the submission date.</li> <li>- The service had staffing pressures during November and December which led to significant gaps in the community midwifery service. In order to ensure that safe care was maintained for all community caseloads a decision was taken to pause a number of continuity of care pathways. This decision will be closely monitored and pathways will be reinstated as staffing levels improve and it is safe to do so.</li> <li>- The Neonatal service has now been formalised as part of the Outstanding Maternity Services Programme and KD has asked for the launch to come to the Board meeting in March. Neonatal colleagues will also use the opportunity to report on progress made in response to serious incident investigations from the previous year as well as neonatal deaths.</li> <li>- SH reported that the maternity theatre build has been formally delayed and the existing mitigation will remain in place.</li> <li>- The Cerner project is on track for the Go Live date and due to the roll out of Cerner Maternity training during March 2022 there will be an additional staffing pressure on the service as staff are released for essential training. The Board is asked to support the proposal that, with the exception of PROMPT emergency training, all other mandatory training is paused to release staff to attend essential Maternity Cerner training, prior to the March 'go-live'. JHi asked how long the pause is anticipated for and SH confirmed it would be for three months from January to March. KD explained this is a similar approach in line with what the Trust has done in the past during the</li> </ul>	<p>Chief Nurse Bo22001</p>

No.	Agenda Item	Action
	<p>implementation of essential electronic systems.</p> <p>The Board supported the proposal that with the exception of PROMPT emergency training, all other mandatory training is paused during January to March to release staff to attend essential Maternity Cerner training, prior to the March 'go-live'.</p> <p>The Board approved the updated Midwifery Continuity of Carer plan as agreed with the Board Level Maternity Safety Champion.</p> <p>The Board noted the contents of the reports, acknowledged the recommendations and was assured by the update provided.</p>	