



**BOARD OF DIRECTORS – PUBLIC MEETING**

**Minutes of the meeting of the Trust's Board of Directors held in Public on  
Tuesday 21 December 2021 at 09:30 via Star Leaf Video Conferencing**

**Present:** Suzy Brain England OBE - Chair of the Board (Chair)  
Mark Bailey - Non-Executive Director  
Karen Barnard - Director of People and Organisational Development  
Alex Crickmar – Acting Director of Finance  
Pat Drake - Non-Executive Director  
Rebecca Joyce - Chief Operating Officer  
Sheena McDonnell - Non-Executive Director  
Dr Tim Noble - Executive Medical Director  
Richard Parker OBE - Chief Executive  
David Purdue - Deputy Chief Executive and Chief Nurse  
Neil Rhodes - Non-Executive Director and Deputy Chair  
Jon Sargeant – Interim Director of Recovery, Innovation & Transformation

**In attendance:** Simon Chiva - Senior Solutions Engineer, Inenco (agenda item D1)  
Fiona Dunn - Deputy Director Corporate Governance/Company Secretary  
Kirsty Edmondson-Jones - Director of Estates & Facilities  
Lois Mellor - Director of Midwifery  
Angela O'Mara - PA to Chair & Chief Executive (Minutes)  
Marie Purdue - Director of Strategy & Improvement  
Emma Shaheen - Head of Communications & Engagement

**Public in attendance:** Peter Abell - Public Governor Bassetlaw  
Dennis Atkin - Public Governor Doncaster  
Hazel Brand - Public Governor Bassetlaw  
Mark Bright - Public Governor Doncaster  
Lynne Logan - Public Governor Doncaster  
Mick Muddiman - Public Governor Doncaster  
Mandy Tyrrell – Staff Governor  
Sheila Walsh - Public Governor Bassetlaw

**Apologies:** Kath Smart - Non-Executive Director

**P21/12/A1 Welcome, apologies for absence and declaration of interest (Verbal)**

The Chair of the Board welcomed everyone to the virtual Board of Directors meeting, including governors, via the audience functionality. The above apologies were noted.

No declarations of interest were noted, pursuant to Section 30 of the Standing Orders.

**P21/12/A2 Actions from Previous Meetings (Enclosure A2)**

Action 1 - Diagnostic Framework Self-Assessment – Board Leadership – action not yet due

Action 2 - Safeguarding Information to Board – action not yet due, to be included in the Chief Nurse Update in January 2022 and quarterly thereafter

Action 3 - Civility Training – action closed

Action 4 - Nursing Budgets and Establishments - action closed

***The Board:***

- ***Noted the updates.***

**P21/12/B1 Maternity Update (Enclosure B1)**

***Perinatal Mortality Dashboard***

The Chief Nurse summarised the content of the paper, including the outcomes of the perinatal mortality review; the findings of which were rated AA or AB, which indicated the provision of appropriate care, with no identified learning.

No Healthcare Safety Investigation Branch reports had been received since the last Board report.

In respect of PROMPT compliance rates for SPR/SHOs, the Chief Nurse confirmed that consideration had been given to alternative approaches, however, certain elements required face to face training, which had proved to be more challenging.

In response to a question from Pat Drake, the Chief Nurse advised that safety huddles and consultant led walkarounds were evidenced on K2.

***Ockenden Update***

The action plan and associated updates were received and noted; the Chief Nurse reported positive feedback had been received from the Local Maternity and Neonatal System.

In respect of the reference to consultant midwives and at the request of the Chair, the Chief Nurse confirmed that consultant midwives were independent practitioners with clinical expertise. They would be required to manage an identified cohort of women, devote approximately one third of their time to work with the University on education and training and the remaining third on research matters. The posts were developed in the late 1990s/early 2000s and were attractive posts for senior midwives.

In response to questions from Sheena McDonnell, the Chief Nurse confirmed that a resource had now been identified to address action 7, relating to the trust website and informed consent. This action was being monitored through the Quality & Effectiveness Committee. It was clarified that the RAG rating of amber/red in relations to audits, indicated the need to undertake the audit, rather than the audit outcome.

The Chief Nurse advised that Ockenden 2 was expected late January 2022 and there was an assumption that the relevant funding would continue.

### ***Continuity of Carer***

In accordance with national guidance the Board received a quarterly update, the NHS ambition in England was that continuity of carer be offered to all pregnant women, as the default model for maternity services. The Trust's plan would be developed over a series of five waves and for a total of eleven teams. However, progress was currently paused due to the impact of the Covid Pandemic and the number of vacancies and was unlikely to be recommenced until the number of WTE vacancies was 10 or less. Continuity of Carer would be prioritised for roll out to Black, Asian, or Mixed ethnicity populations, who were identified as those likely to experience adverse outcomes first.

Pat Drake acknowledged the positive feedback from pregnant women in respect of continuity of carer provision, noting an improved service, communication and receipt of information. It was also noted that the service was championed by the Royal College of Midwives, however, it was acknowledged that the staffing of the service was a challenge and the impact on midwives, including on-call demands was significant.

In response to a question from Sheena McDonnell, the Chief Nurse confirmed that the necessary data to identify those BAME, low income/deprived areas was readily available and would be the primary focus when the service was able to be reintroduced.

### ***Maternity Self-Assessment***

The Board received the updated maternity self-assessment action plan, the self-assessment tool had formed part of the maternity safety discussions with the Chief Midwifery Officer and her team in November 2021. The Chief Nurse confirmed that work on the strategy would commence in the New Year, as responsible officer he would be supported by an external resource.

### **P21/12/C1 Ambulance Handovers (Enclosure C1)**

The Chief Operating Officer presented to Board the latest position in respect of actions to improve the number of patients waiting more than 15 minutes from arrival to handover.

Currently 42% of handovers were completed in less than 15 minutes. An improved position was reported for November but ongoing work was required.

The supporting plan provided an overview of actions in four key themes, pre-hospital/front door issues, through the hospital, operational grip and escalation and accuracy of handovers.

Following recent discussions at an extra-ordinary meeting of the Finance & Performance Committee, Neil Rhodes, Committee Chair, confirmed he was assured by the quality and detail of the action plan, whilst recognising the need for more work to be done.

In respect of the need to improve the accuracy of handovers and improved data Neil Rhodes asked the Chief Operating Officer to explain the scale of the issue; it was confirmed that following a small scale audit discrepancies in reporting were identified, with the actual position better than reported. Yorkshire Ambulance Service had worked collaboratively to address the identified issues. Discussions with NHSE/I confirmed that common issues across

providers could be supported via best practice advice from the Emergency Care Improvement Support Team (ECIST).

Pat Drake acknowledged the improving position and looked forward to seeing the impact of the medical decision unit. In respect of the length of time patients were waiting in ambulances the Chief Operating Officer confirmed this was included within the longest wait data and was being tracked through the Finance & Performance Committee.

The Chief Executive confirmed ambulance handover delays were often an indicator of bed occupancy/flow issues across the site. Ensuring appropriate discharge for those medically fit to leave and with no right to reside was a critical factor, however this was not completely under the control of the Trust and required a system/partnership approach.

In response to a question from Mark Bailey it was confirmed that a number of arrangements were in place to support collaborative working, including regular meetings with the ambulance services and primary care through the Health & Care support cell meetings.

***The Board:***

- ***Noted and took assurance from the Ambulance Handover Update.***

**P21/12/D1 The Green Plan (Enclosure D1)**

The Director of Estates and Facilities and Senior Solutions Engineer, Simon Chiva of Inenco presented to Board the Trust's Green Plan. Approval was sought for submission to the ICS ahead of the deadline of 14 January 2022. The ICS would then develop a consolidated system-wide green plan by 31 March 2022.

Board had previously received an extensive presentation as part of the Board workshop on 19 October, subsequently considered by the Trust Executive Group in December for further analysis and questioning.

The Green Plan was an overarching strategy to achieve net zero status by 2045, the requirements of which were included in section 18 of the NHS standard contract 2021/2022.

In response to a question from Neil Rhodes in respect of operationalising the plan, Simon Chiva confirmed the need to translate the Sustainable Development Assessment Tool (SDAT) into meaningful information, supported by the development of a communications and training plan. The overarching strategy would be supported by a series of programmes and task and finish groups to progress the respective actions. Neil Rhodes stressed the importance of ensuring that colleagues could associate with the plan and understand what it meant to them.

The Chair shared with members of the Board her ambition to fly a green flag on the Trust sites to indicate compliance with the green plan, an accreditation associated with Keep Britain Tidy where she is Chair.

Board granted their approval of the plan, developed in conjunction with Inenco. The objectives of which would now be progressed by the Trust.

The Chair shared her appreciation with Simon Chiva and the Director of Estates & Facilities for the extensive work completed to date.

***The Board:***

- ***Approved and took assurance from the Green Plan***

**P21/12/E1 Minutes of the meeting held on 19 October 2021 (Enclosure I1)**

The Executive Medical Director sought clarity in respect of minute P21/11/C3, in relation to the Medical Examiner Team's scrutiny of all deaths.

Post meeting it was confirmed that no amendment was required.

***The Board:***

- ***Approved the minutes of the meeting held on 16 November 2021.***

**P21/12/E2 Any other business (to be agreed with the Chair prior to the meeting)**

In response to a question from Pat Drake it was confirmed that the current number of active Covid-19 patients was 42, the total number of Covid-19 patients stood at 63.

Before the onset of the Omicron variant the position was reported to be settled and winter plans were in line with anticipated demand. Omicron had impacted the levels of infection, sickness absence for staff and critical supply chains. The vaccination programme was proving successful and the booster vaccination was expected to significantly increase immunity and reduce hospitalisation. The vaccination target for South Yorkshire was 143k per week until the end of the year – last week 98.5% of the target had been met.

It was reported that approximately 80% of critical care occupancy were unvaccinated patients.

The North East & Yorkshire region had now faced multiple waves of Covid, plans were currently being reviewed, conversion of wards was being considered and there was a clear focus on managing cover, sickness absence and isolation guidance in order to maximise staffing, whilst ensuring that colleagues were kept safe.

Supply chain issues would be raised regionally and nationally, availability of lateral flow kits was likely to be a challenge, colleagues were encouraged to be patient with the gov.uk site as availability changed throughout the day. Partnership working, mutual aid, reinforcing the hands, face, space and ventilation message and the importance of vaccination were all key messages.

In respect of Nosocomial standards the Chief Nurse confirmed that Infection, Prevention and Control standards had been maintained and audits had indicated no lapses in preventative measures.

Current visiting arrangements had been restricted to one hour pre-arranged for one consistent family member, although flexibility was being exercised in compassionate/end of life cases and in maternity services.

**P21/12/E3 Governor Questions regarding the business of the meeting (10 minutes) \***

The Chair of the Board thanked governors for their continued engagement.

In response to a question enquiring if recovery and restoration was achievable and to what extent the non-executive directors were assured of the plans, it was confirmed that Jon Sargeant had been tasked with the delivery of robust recovery plans. Fortnightly focus & delivery group meetings had been put in place, efforts were focused and delivery of plans was joined up and timely. The Chair acknowledged the good working relationships formed with the private sector, supporting clinical prioritisation.

Neil Rhodes confirmed that the Finance & Performance Committee would continue to receive updates on progress, although services had been impacted by Covid-19, restoration remained a focus. Plans were robust, and the Trust was reported to be well placed from a planning perspective.

In closing, the Chair reiterated the need for hands, face space, ventilation and vaccination and shared season's greetings with the Board and those in attendance.

***The Board:***

- ***Noted the comments raised.***

**P21/12/E4 Date and time of next meeting (Verbal)**

**Date:** Tuesday 25 January 2022.

**Time:** 09:30am

**Venue:** StarLeaf Videoconferencing

**P21/12/E5 Withdrawal of Press and Public (Verbal)**

***The Board:***

- ***Resolved that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.***

**P21/12/F Close of meeting (Verbal)**

The meeting closed at 11:05



**Suzy Brain OBE**  
**Chair of the Board**

**Date**  
**25 January 2022**