P22/10/A1 - P22/10/G

Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust

BOARD OF DIRECTORS – PUBLIC MEETING

Minutes of the meeting of the Trust's Board of Directors held in Public on Tuesday 25 October 2022 at 09:30 via MS Teams

Present:	Suzy Brain England OBE - Chair of the Board (Chair) Hazel Brand - Non-executive Director George Briggs - Interim Chief Operating Officer Alex Crickmar - Acting Director of Finance Mark Day - Non-executive Director Jo Gander - Non-executive Director Zoe Lintin - Chief People Officer Richard Parker OBE - Chief Executive Neil Rhodes - Non-executive Director Jon Sargeant - Interim Director of Recovery, Innovation & Transformation Kath Smart - Non-executive Director
In attendance:	Fiona Dunn - Director Corporate Affairs/Company Secretary Claudia Gammon – Corporate Governance Officer (minutes) Dr Joseph John - Medical Director for Operational Stability and Optimisation Lois Mellor - Director of Midwifery Adam Tingle - Acting Director of Communications & Engagement
Public in attendance:	Peter Abell - Public Governor Bassetlaw Henry Anderson - Member of the Public Mark Bright - Public Governor Doncaster Lynne Logan - Public Governor Doncaster Andrew Middleton - Public Governor Bassetlaw Lynne Schuller - Public Governor Bassetlaw Mandy Tyrrell - Staff Governor Sheila Walsh - Public Governor Bassetlaw
Apologies:	Mark Bailey - Non-executive Director Dr Tim Noble - Executive Medical Director Angela O'Mara – Deputy Company Secretary
P22/10/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 and the member of public in attendance. The above apologies for absence were noted.
	No declarations of interest were received, pursuant to Section 30 of the Trust's

No declarations of interest were received, pursuant to Section 30 of the Trust's Constitution.

P22/10/A2 Actions from Previous Meetings (Enclosure A2)

Action 1 - Board Assurance Framework – Strategic Aim 1

The action had now been closed.

Action 2 - Impact of Pay Award

The action had now been closed.

Action 3 – Risk Management

The action was not yet due, an update was to be provided at November's Board meeting.

The Board:

- Noted the updates to the action log.

P22/10/B1 Maternity Update (Enclosure B1)

The Board received the Maternity Update, which provided the findings of perinatal deaths, Health Safety Investigation Branch (HSIB) referrals, training compliance, service user voice feedback and compliance in respect of the Clinical Negligence Scheme for Trusts (CNST).

The Director of Midwifery summarised the key highlights from the report, noting expectant mothers would be offered whopping cough and covid vaccinations as part of their antenatal care. MAMA (Mums & Midwives Awareness) Academy wellbeing wallets were provided for antenatal notes, which included educational health messages to raise awareness through pregnancy.

A trajectory had been set to achieve 90% training compliance by December 2022.

The report of the independent investigation into East Kent Maternity Services had been published and would be reviewed by the maternity team to establish learning.

Two of the Clinical Negligence Scheme for Trusts safety actions were reported to be at risk.

In response to a question from Kath Smart, the Director of Midwifery confirmed an increase in still birth rates had been seen throughout the pandemic, potentially linked to Covid-19. Increased reporting had been seen at a regional and national level and the Trust was not an outlier.

The Chief Executive acknowledged the continuing national challenges in maternity services.

The Board:

- Noted and took assurance from the Maternity Update.

P22/10/B2 Learning from Prevention of Future Deaths Report Response

The Chief Executive provided an update on the Prevention of Future Deaths Report (PFD) received from Her Majesty's Coroner in June 2022. The coroner had identified that there were weaknesses in the investigation of the serious incident which occurred at Bassetlaw Hospital in 2018.

The Trust had provided a full response to HM Coroner and further work was ongoing to ensure learning was shared and corrective actions identified and implemented.

No questions were received in relation to this update.

The Board:

Noted the Learning from Prevention of Future Deaths Report Response

P22/10/C1 Ambulance Handovers (Enclosure C1)

The Board received the monthly ambulance handover report from the Interim Chief Operating Officer.

An Increase of 30% and 40% had been seen at Doncaster and Bassetlaw respectively, in relation to the number of patients brought to hospital by ambulance, who did not require treatment. The Chief Executive noted that percentage rises should be considered alongside the actual numbers which are relatively small.

Winter plans were in place to support flow through departments, with the opening of the Clinical Assessment Unit (CAU), Early Assessment Unit (EAU), Ward 22 and additional beds at Montagu.

In response to a question from Neil Rhodes with regards to the impact on flow through the hospital and the number of patients brought to the Emergency Department who did not require treatment, the Interim Chief Operating Officer confirmed the data identified an increased number of referrals to hospital, impacted by availability of GP appointments. Work continued with primary care to understand the challenges faced and improve patient pathways.

In response to a question from the Chair of the Board regarding patients that required social care, the Chief Executive confirmed that the pandemic had created stress across the system and similar workforce challenges and access to social care were seen by the Trust's partners.

Covid-19 levels had risen across the Trust in recent weeks, which had presented an opportunity to understand and test the plans in place for winter.

The Interim Chief Operating Officer identified that patients discharged without treatment or intervention at Doncaster often related to physical illnesses, as compared to mental health issues at Bassetlaw.

The Board:

- Noted and took assurance from the Ambulance Handovers Update

P22/10/D1 Q2 2022-23 Update Corporate Director Objectives (Enclosure D1)

The report provided a quarter 2 update in respect of the corporate breakthrough objectives, captured by Monday.com project software. Data and supporting narrative would demonstrate progress against the objectives throughout the year.

Kath Smart sought clarification of the status "stuck" relating to the Chief Operating Officer's objective **COO06** (*Develop*, agree and implement robust plans to manage winter pressures and enhanced IPC measures), the Chief Executive confirmed this was terminology used by Monday.com and highlighted the need for further work to progress the action.

In respect of the Executive Medical Director's objective **MD08** (Fully embed the Medical Advisory Committee (MAC) as the vehicle for engagement and communication with the wider senior medical workforce) it was agreed that a visual to identify the reporting structure of the Medical Advisory Committee and the Risk Management Board would be provided.

ΤN

In response to a question from the Chair of the Board, it was confirmed that the subcommittees of Board would review progress against objectives between the scheduled quarterly Board updates. This would allow assurance to be gained or areas of concern to be highlighted; where a more detailed assessment was required arrangements would be made to support this. Post meeting, the Chair of the Board agreed with the Chief Executive that individual executives would meet with non-executive directors to provide an in-depth insight.

In response to a question from Mark Day, the Chief Executive confirmed the quality standards and delivery of elective and emergency care would be subject to careful monitoring.

The Integrated Care Board would monitor delivery of robust winter plans against national standards. In response to a question from Mark Day with regards to the appropriate resource to manage winter, the Chief Executive confirmed the aim was to ensure efficient and effective use of the workforce within agreed budgets. Additional beds had been opened earlier than expected and system partners alerted to increased activity levels.

The Board

Noted and took assurance from the Q2 2022-23 Update Corporate Director Objectives

P22/10/E1 <u>Annual Emergency Preparedness, Resilience and Response Core Standards Compliance</u> (Enclosure E1)

The Interim Chief Operating Officer confirmed that the national reporting of these standards had been on hold during the pandemic. A self-assessment for 2022/23 had been undertaken and a partial compliance score of 77% achieved.

Training for emergency preparedness, resilience and response standards and the evacuation policy were on track for completion in Summer 2023 and would be subsequently presented to the Board prior to submission to the regional/national teams. It was noted that EPRR actions should be incorporates into the corporate objectives, business continuity plans and Divisional and Directors plans.

Neil Rhodes reflected on the last two years and the impact of the pandemic and the major incident in the Women's and Children's Hospital and acknowledged the standard secured.

The Board confirmed its approval of the statement of compliance and supporting improvement plan.

The Board

- Approved the Annual Emergency Preparedness, Resilience and Response Core Standards Compliance

P22/10/F1 Any other business (to be agreed with the Chair prior to the meeting)

The Deputy Lead Governor shared his support and appreciation of the Foundation School in Health partnership with Retford Oaks Academy. The Trust had been well represented at the recent launch event, with senior colleagues and board members in attendance.

The Chair of the Board thanked the Deputy Lead Governor for his support.

P22/10/F2 Governor Questions regarding the business of the meeting (10 minutes) *

The following questions were received from governors, presented by the Lead Governor:

<u>Maternity</u> - We note the reset of the trajectory and the improved positions in terms of training. As this is an area that is considered by CQC, if an inspection were to be announced, would this provide any concerns for the trust?

The Chief Executive acknowledged that due to the pressures within Urgent and Emergency Care and Maternity Services the Trust's training figures were not where they needed to be. This had been impacted by recovery responses and the reduction of face-to-face training. The Education Team were working with service leads to review training delivery and a trajectory to achieve compliance by the end of the financial year had been agreed. The People Committee had oversight of this performance.

Handovers - Ambulance handover, delays were typically multi factorial. What collaboration actions were being undertaken by the ICS / ICB and Place in dealing with delays. (It was noted that a full discussion was had on this subject which responded to this question). Is there any data in terms of ambulance diverts? Additional information was a member of the public contacted the lead governor asking why they had been diverted away in an ambulance from their closest hospital at Bassetlaw.

The Interim Chief Operating Officer confirmed that there were policies and procedures in place with both Yorkshire and East Midlands Ambulance Services that when services were challenged contact would be made to divert to the nearest appropriate hospital on the grounds of clinical safety. Data relating to the number of diverts was closely monitored.

The Board:

- Noted the governor observations, question and feedback provided.
- P22/10/F3 Minutes of the meeting held on 27 September 2022 (Enclosure F3)

The Board:

- Approved the minutes of the meeting held on 27 September 2022.
- P22/10/F4 Date and time of next meeting (Verbal)

Date: Tuesday 29 November Time: 09:30am Venue: MS Teams

P22/10/G Close of meeting (Verbal)

The meeting closed at 10:45

Suzy Bach 62

Suzy Brain England OBE Chair of the Board 29 November 2022