BOARD OF DIRECTORS OPEN MEETING MINUTES

Date:	Thursday 25 September 2024	Time:	09:30 – 12:20				
Venue:	Conference Room, Field House, BRI	Chair:	Sarah Jones, Chair				
Present:	 Non-Executive Directors: Sarah Jones (SJ) Bryan Machin (BM) Julie Lawreniuk (JL) Zafir Ali (ZA) Executive Directors: Professor Mel Pickup, Chief Executive (MP) Sajid Azeb, Chief Operating Officer & Deputy Chief Executive (SA) Professor Karen Dawber, Chief Nurse (KD) Dr Ray Smith, Chief Medical Officer RS) Ben Roberts, Chief Finance Officer (BR) Mark Hindmarsh, Director of Strategy and Transformation (MHi) 						
In Attendance:	 Paul Rice, Chief Digital and Information Officer (PR) David Moss, Director of Estates and Facilities (DM) Renee Bullock, Chief People and Purpose Officer (RB) Laura Parsons, Associate Director of Corporate Governance / Board Secretary (LP) Ruth Tolley, Quality Lead for Patient Experience (RT) for item Bo.9.24.5 only Shaheen Kauser, Patient & Public Engagement Officer (SK) for item Bo.9.24.5 only Sara Hollins, Director of Midwifery (SH) for item Bo.9.24.7 only Sam Wallis, Consultant Neonatologist (SW) for item Bo.9.24.7 only Katie Shepherd, Corporate Governance Manager Tabitha Lawreniuk, Personal Business Manager as Secretariat 						
Observing:	 Farideh Javid, Governor Molly Tate, Graduate Management Traine Zainab Rasheed, Graduate Management ⁻ Yaqub Ibrahim, Graduate Management Traine 	Frainee					

No.	Agenda Item	Action
Section 1:	Opening Matters	•
Bo.9.24.1	Apologies for Absence	
	 Apologies were received as follows: Mohammed Hussain (authorised absence), Non-Executive Director Sughra Nazir, Non-Executive Director Altaf Sadique, Non-Executive Director Karen Walker, Non-Executive Director Professor Louise Bryant, Non-Executive Director 	

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Bo.9.24.2	Declarations of Interest	
	There were no declarations of interest in relation to the items on the agenda.	
Bo.9.24.3	Minutes of the Meeting held on 11 July 2024	
	The minutes of the meeting held on 11 July 2024 were approved as a true and accurate record.	
Bo.9.24.4	Matters Arising	
	The following actions were reviewed, and the outcomes confirmed.	
	• <u>Bo240015 Report from the Chair of the People Academy – March and April 2024:</u> Discussions between Leeds University and the Trust around the sexual safety charter have taken place. <u>Action completed.</u>	
	<u>Bo230017 Corporate Strategy</u> – A key has been added to the logic model document. <u>Action completed.</u>	
Section 2:	Patient Care	
Bo.9.24.5	Patient story	
	SJ welcomed SK and RT to the meeting for this item. Board colleagues had viewed the patient story video prior to the meeting, and a section of the video was played in the meeting. It featured a patient's daughter describing her experience as a carer for her mother.	
	JL recognised the importance of compassionate treatment as well as good clinical care and the need to consider how to influence this further so that all staff are compassionate and kind.	
	KD confirmed work is ongoing to ensure more accessibility for carers of patients to allow them to be more present and able to assist whilst the patient is in hospital. RT recognised the importance of family involvement in care, and family-focused care. SK also commented on the increased opportunities to learn as a result of working closely with family members and developing relationships with them.	
	The Board thanked RT and SK for joining the meeting.	
Bo.9.24.6	Report from the Chair of the Quality and Patient Safety Academy – August and September 2024	
	JL gave an overview of the reports which provided an update from the Quality and Patient Safety Academy meetings held in August and September 2024.	

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	JL alerted the Board to a new risk on the high-level risk register relating to capacity issues in chemotherapy. Mitigations were in place and the Academy was assured that the risk was being managed appropriately.	
	JL also alerted the Board to the ongoing challenge of addressing the Summary Hospital-level Mortality Indicator (SHMI) rating, which does not reflect the Trust's actual mortality rates which are the best in the region. A programme of work was being undertaken to address the associated coding issues. The Board would receive an update on the progress in relation to the actions being taken at the next Board meeting.	Chief Digital and Information Officer Bo240017
	There were two further issues to alert to the Board in relation to a moderate risk to achieving compliance with safety action 8 of the Maternity Incentive Scheme (90% of all relevant staff groups attending multi-disciplinary emergency skills training). There were plans to address this and training attendance will be closely monitored until deadline. The Academy was advised of an increase in cases of MSRA colonisation in babies as part of routine swabbing within Women and Newborn services. There have been no associated cases of bacteraemia and no instances of harm to babies, and the Academy was assured by the timely identification of the outbreak and robust plans to address.	
Bo.9.24.7		
DU.J.24.7	Maternity and Neonatal Services Update KD welcomed SH and SW to the meeting to provide an update on maternity and neonatal services. In relation to maternity services, SH highlighted that as previously referenced, there is a moderate risk to achieving compliance with Safety Action 8 of the Maternity Incentive Scheme, based on the current trajectory of obstetric and anaesthetic compliance. There is a high level of confidence that the obstetric position will be recovered before the 30 November deadline, but less confidence that the anaesthetic position will be recoverable.	
	The increase in cases of MRSA colonisation in the maternity and neonatal unit has now been declared as an official outbreak despite no cases of harm. There have been no new cases in August, but it has been agreed to implement decolonisation for staff to ensure that there is no further spread. SJ recognised the hand washing and infection control procedures of the unit are exemplary and very clearly signposted upon entry to the neonatal unit.	
	The Board was asked to approve the Maternity and Newborn Safety Investigations (MNSI) escalation of concerns improvement plan, specifically the actions relating to consultant attendance at clinical scenarios which has been developed following the receipt of an escalation of concerns letter. This is a compliance requirement of Safety Action 4 of the Maternity Incentive Scheme.	

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	SW provided an update in relation to the neonatal service, highlighting the current workforce position including the improvements made to the sickness rate but a continued challenge around the number of speciality nurses (currently at 47% against a target of 80%). The Trust was a positive outlier in some areas of the National Neonatal Audit Project 2023. In relation to mortality, since March 2024 there have been 12 infant deaths including 8 preterm babies and 2 deaths on the labour ward. There were no areas of concern in terms of specific themes and no issues with the care provided. In terms of achievements, SW recognised high levels of family engagement and positive feedback received, and the recent CQC visit.	
Bo.9.24.8	Research activity in the Trust	
	RS gave a brief overview of the report which provided information on some of the key research activities in the Trust. He highlighted that at the end of 2023/24 the Trust's recruitment into research studies was 26,325 (the highest in Yorkshire and Humber region) with the Bradford Royal Infirmary site being the highest recruiting site in the country with 25,320 recruits.	
	The Board was assured by the update.	
Section 3:	People	
Bo.9.24.9	Report from the Chair of the People Academy – August and September 2024	
	 RB gave an overview of the reports which provided an update from the People Academy meetings held in August and September 2024: Board members were asked to complete the three Freedom to Speak Up e-learning modules as a priority. October is Speak Up month and there will be a focus on the power of listening. Year to date absence is 5.73%, down from 6.09% in July 2023, but this remains a key focus area. The report detailed a number of mitigating actions to address this. The 2024 Staff Survey launches on 30 September. Last year's response rate was 43% and for 2024 there is a stretch target of 92%. RB felt this to be achievable if dedicated focus is given to encouraging staff completion. 	
	JL referred to the increased number of staff in post over the last year and the financial impact given the current focus on closing the gap. RB confirmed that these are predominantly clinical positions, and that all non- clinical vacancies require executive sign off to ensure they are appropriate and necessary. KD recognised that there has been a corresponding reduction in bank and agency usage. A report detailing the drivers behind the change in staffing numbers would be presented to the next People Academy meeting.	Chief People and Purpose Officer Bo240018
	The Board was assured by the update.	

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	Workforce Report	
	The report was noted by the Board.	
	Medical Appraisal & Revalidation Annual Statement of Compliance	
	The report was noted by the Board.	
	2024 Training and Education Self-Assessment Report	
	The report was noted by the Board.	
Bo.9.24.10	Equality & Diversity Council (EDC) update	
	MP referred to the update report. RB had joined the EDC meeting to discuss the observations made during her first 90 days in post and complimented the EDI team on their exemplar EDI strategy and strong foundations for EDI in the Trust. There were a number of key actions to undertake to develop this further including the review of people policies and practices, building on the success of refreshed staff equality networks, and working on management development to realign leadership approaches and cultures. MP also updated that she had been invited to present at the Future Leaders Programme discussion with a focus on Multiculturalism in the NHS, reflecting that she was invited to this given the progress and commitment BTHFT has made to equality and diversity.	
	The Board was assured by the update.	
Section 4:	Finance and Performance	
Bo.9.24.11	Report from the Chair of the Finance and Performance Academy – August and September 2024	
	JL gave an overview of the reports which provided an update from the Finance and Performance Academy meetings held in August and September 2024:	
	 The Trust will not reach the referral to treatment (RTT) target for over 65 week waits, with 71 expected at the end of September against a target of 0. The Trust is seeking mutual aid support to clear long waits where possible. There is a significant risk that the Trust will not deliver its financial plan. It was suggested that discussions are planned with the Board in October and November to discuss and understand the implications should the financial plan not be delivered. There is also a significant risk that the Trust will not deliver the £38.9m of schemes required to deliver the financial plan. As at month 5, £28.6m of schemes are forecast to be delivered against the financial plan requirement of £38.9m. 	

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	There is a significant risk that the Trust will require cash support from NHS England in the latter months of the financial year. Even if cash is provided, this will likely impact on capital allocation. BR confirmed other organisations were already requesting cash and revisiting their capital plans as a result.	
	BR referred to a financial framework for Trusts to follow should a change in financial forecast be declared. This included both ICB and NHS England oversight. ZA queried both the deadline for applying for cash support, and any impacts and repercussions of this, and BR confirmed that the deadline would be by the end of month 9.	
	BM referred to opportunities available through digital innovation, recognising this would result in a reduced need for staff which makes this very complex. MHi recognised the balance between implementing short term gains to meet the target in year, and longer-term transformational measures that will help support finances in the next year and beyond.	
	The Board was assured by the update.	
	Closing the Gap	
	MHi referred to the presentation which was noted by colleagues. He noted the change in focus to deliverability of schemes rather than the number of schemes on the tracker and highlighted that 50% of schemes are recurrent which is beneficial as this will impact on subsequent years. Closing the gap week was ongoing and it is hoped that this will further encourage progress on closing the gap schemes, with a number of sessions available for services to attend for support in specific areas.	
	Integrated Dashboard	
	The Board noted the report.	
	Finance Report	
	The Board noted the report.	
	Performance Report	
	The Board noted the report.	
Section	5: Audit & Assurance	
Bo.9.24.	12 Report from the Chair of the Audit Committee – 10 September 2024	
	BM introduced the report and alerted the Board to a report received from the Chief Nurse on progress in addressing the recommendations in the internal audit report, Nursing Assessment and Care Plans, which had received Limited Assurance.	
	KD advised that whilst the report indicates that care plans are not fully completed, this relies on data from one particular section of EPR and the	

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	information is often recorded in a separate data entry. A solution was being considered that would ensure data entry into the correct fields. She also highlighted that the report is not reflective of the level of care received as care is managed via a number of other routes on a daily basis. Following consideration by the Quality Committee, an updated report would be shared with the Audit Committee.	
	The Board was assured by the update.	
Bo.9.24.13	Report from the Chair of the Charitable Funds Committee – 22 July 2024	
	SA introduced the report and alerted the Board to the delay in progress against plan for the move to Charity independence due to the departure of the Charity Director. There has since been an appointment to this role with the successful appointee due to start on 4 November 2024.	
	The Board was assured by the update.	
Section 6:	Business Reports	
Bo.9.24.14	Report from the Chair	
	SJ introduced the report to the Board, highlighting her work to support recruitment across the patch including sitting on the Chair interview panel at Airedale NHS Foundation Trust. An appointment was not made, so at present an Interim Chair would remain in place.	
	The Board noted the report.	
Bo.9.24.15	Report from the Chief Executive	
	MP introduced the report, highlighting the following points:	
	 Performance remains strong in comparison with other Trusts across a number of areas including urgent care and cancer metrics. Whilst progression is being made on the St Luke's Day Case Unit, disappointingly, the contractor has failed to meet the handover date of 31 August and the Trust is now awaiting a revised completion date. The planned go live of the theatres EPR enhancement has also been rescheduled to the end of November to allow for staff training and familiarisation with the function to reduce service disruption. 	
	 Asian Heritage Month was celebrated in August with a number of positive events across the Trust. MP acknowledged that sadly, in the same month, the country witnessed racism and rioting across the nation. In recognition of this, an extraordinary 'Pause for Peace' event was held which was well received by colleagues. The Long Service and Brilliant Braford Awards would be held on 26 September, which the Board had been invited to attend. On 17 September, the Trust hosted Stephen Kinnock MP, Minister of State for Care, who visited to hear about the work being 	

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	 undertaken around integrated care and some of our specialist services. The factual accuracy checks in respect of the draft CQC reports has now been completed. The publication date of the final reports has not yet been received. 	
	MP also presented the West Yorkshire Association of Acute Trusts (WYAAT) Memorandum of Understanding (MoU) which had been updated.	
	The Board approved the updated WYAAT MoU and noted the update.	
Section 7:	Governance	
Bo.9.24.16	Board Assurance Framework and High-Level Risks	
	LP introduced the new Board Assurance Framework (BAF) which now contained 13 risks which have been aligned to the Trust's strategic objectives. LP advised that that a review of risk appetite is still required, and this will initially be considered with the Committees/Academies in relation to the strategic objectives aligned to them, and then presented to the Board for approval in November.	
	The Board approved the updated BAF.	
	LP also presented the high level risk register report, and updated on all changes (new risks, closed risks, and changes in score) that had occurred since the last Board meeting.	
	The Board confirmed their assurance that all risks on the High Level Risk Register are appropriately recognised and recorded, and that all appropriate actions are being taken within appropriate timescales where risks are not appropriately controlled.	
Bo.9.24.17	Board, Committee and Academy Terms of Reference and work plans	
	LP presented the paper which provided the updated Terms of Reference and work plans for the Finance and Performance Committee, People Academy, and the Quality Committee for review. The paper also included the Terms of Reference for the Board Nominations and Remuneration Committee and the work plan for the Board of Directors.	
	The Board of Directors approved the Committee/Academy Terms of Reference and work plans, and the Board work plan.	
Bo.9.24.18	Premises Assurance Model (PAM) progress report	
	DM presented the PAM report, which is used to provide assurance for the healthcare environment and to ensure patients, staff and visitors are protected against risks associated with hazards such as unsafe premises. Whilst the overall rating remained as 'good', there were a number of areas detailed within the paper which had been reduced to 'requires minimal improvement'.	

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	The Board was assured by the update.	
Bo.9.24.19	Annual security report (inc. Violence Prevention and Reduction Standard)	
	DM introduced the report which sets out the Trust's progress in relation to the management of security. He updated the Board on the increased security presence within the A&E department and the upcoming implementation of body worn cameras to help de-escalate situations and enhance the safety of staff. The PCSO presence across sites would also be maintained.	
	The Board was assured by the update.	
Bo.9.24.20	Annual Data Protection Officer report	
	PR presented the report which sought to update the Board on the Information Governance programme, confirming the results of the Data Security and Protection Toolkit assessment for 2023/24 and internal audit outcome, and provided an overview of the arrangements in place to manage information risks and compliance in the year ahead.	
	The Board was assured by the update.	
Bo.9.24.21	Use of the Trust seal	
	LP presented the paper which provided a summary of the use of the Foundation Trust Seal during the period 15 September 2023 to 18 September 2024, noting that there were thirteen instances.	
	The Board noted the report.	
Section 8:	Board Meeting Outcomes	
	Any Other Business	
	PR referred to the LIMS deployment which is scheduled to take place on 1 October. Discussions were ongoing regarding the relative preparedness to inform a go / no go decision, but at the moment, there were not any anticipated delays.	
Bo.9.24.23	Issues to Refer to Board Committees/Academies or Elsewhere	
	There were no issues to refer elsewhere.	
Bo.9.24.24	Review of Meeting	
	The Board agreed that it was most useful to receive the Chair and Chief Executive reports at the start of the meeting and so future agendas would be revised to reflect this. Comments were also made around the benefits of watching an extract from the patient story video live during the meeting.	



No.	Agenda Item	Action
Bo.9.24.25	Date and Time of Next Meeting	
	14 November 2024 – 9:30am	



ACTIONS FROM BOARD OF DIRECTORS OPEN MEETING – 25 September 2024

Action ID	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
Bo240016	Bo.5.24.15	Report from the Chair of the Charitable Funds Committee: LP and BM would discuss offline and update the terms of reference as appropriate to clarify the wording of 'Corporate Trustee's'.	Associate Director of Corporate Governance and Board Secretary	November 2024	Amended TOR to be presented to Charitable Funds Committee and Board in November 2024. Action closed.
Bo240012	Bo.5.24.5	Patient Story: KD would work with EC on the trauma informed charter for BTHFT and bring this back to a future meeting.	Chief Nurse	November 2024	Work is being undertaken with Education on incorporating this with training. This is a long-term initiative and over time more staff will be aware. Action closed.
Bo240017	Bo.9.24.6	Report from the Chair of the Quality and Patient Safety Academy – August and September 2024: The Board would receive an update on the progress in relation to coding at the next Board meeting.	Chief Digital and Information Officer	November 2024	Included on the November Board agenda. Action closed.
Bo240018	Bo.9.24.9	Report from the Chair of the People Academy – August and September 2024: A report detailing the drivers behind the change in staffing numbers would be brought back to the next People Academy.	Chief People and Purpose Officer	November 2024	Presented at the People Academy on 24 October 2024. Action closed.