

NORTH YORKSHIRE COUNTY COUNCIL

SCRUTINY OF HEALTH COMMITTEE

18 November 2011

Draft responses to consultations by Bradford District Care Trust and the Yorkshire Ambulance Service on proposals for operating as NHS Foundation Trusts

Purpose of Report

1. The purpose of this report is to provide an opportunity for the Committee to agree its responses to consultations by Bradford District Care Trust (BDCT) and the Yorkshire Ambulance Service (YAS) on their proposals for operating as NHS Foundation Trusts.

Introduction

2. This matter was first discussed at the Committee meeting on 23 September 2011 in Skipton when Members resolved, inter alia, that the draft responses to both consultations be referred to the next meeting.
3. Draft responses to BDCT (including a letter to Cllr Polly English) and YAS are attached as Appendices 1 and 2 respectively.
4. For ease of reference relevant extracts from both consultations are attached as Appendices 3 and 4.

Recommendation

5. That Members consider the attached draft responses to the consultation documents and taking into account points raised at the meeting, authorise the Chairman to respond on behalf of the Committee within the required deadlines.

Background Documents: None

Bryon Hunter
Scrutiny Team Leader
County Hall, NORTHALLERTON

BH/1 November 2011

Draft Response to Bradford District Care Trust's Consultation on Operating as an NHS Foundation Trust

Q1. Do you agree with our vision and aims for the future?

Response: Yes

Q2. Do you agree that the minimum age limit (14 years) for membership is still appropriate?

Response: Yes

Q3. Do you agree with the membership categories we suggest?

Response: Yes

Q4. Do you agree with the suggested number of Governors in each of the public membership areas (public constituencies)?

Response: No. According to the consultation document Craven residents account for 10% of the Trust's catchment population but have only been allocated 1 out of 15 places in the public governors, 6.6%. The excessive cost and time spent travelling are unique to patients from the Craven area; consequently we feel they should be given greater recognition by appointing 2 public governors from the Craven area.

Q5. Do you agree with the suggested number of staff Governors and the proposed staff groups?

Response: Yes

Q6. Do you agree with the list of organisations we would like to invite to be Appointed Governors?

Response: Against a background of what we feel as a gradual contraction of services towards the Bradford area away from rural communities in Craven, we feel that Craven is not been given sufficient representation and influence on the Council of Governors as currently proposed. We feel there should be two appointed governors from the Craven area; one representing Craven District Council and one representing North Yorkshire County Council.

Indeed arising out of the consultation on this matter in 2009 the Trust, after receiving representations from this Committee, invited the County Council to appoint a non-elected governor. County Councillor Polly English was duly appointed to serve until May 2013 (see attached copy letter). It is difficult to understand why this appointment has been ignored.

We suggest that one or more of the emerging GP Clinical Commissioning Groups should be invited to become Appointed Governors.

We also suggest it would also be appropriate to include one or more local branches of national organisations such as Age UK or the Alzheimer's Society.

Q7. Do you agree with our suggestion for the Board of Directors?

Response: Yes

Other comments

Finally we accept that in order to respond to some of our comments above, particularly with regard to ensuring there is appropriate representation from local authorities and communities in Craven whilst at the same time maintaining broadly the same proportion of public, staff and appointed governors, it may be necessary to have more than 26 Governors.

DRAFT



North

Yorkshire County Council

Chief Executive's Group

Your ref:

Carole Dunn, Solicitor

Assistant Chief Executive (Legal and Democratic Services)
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www.northyorks.gov.uk

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3 September 2009

Dear Mr Large,

Bradford District Care NHS Foundation Trust

I am writing to inform you that at the Executive meeting, 28 July 2009, the following County Councillor was appointed to the above organisation, to serve until the next County Council Elections in May 2013.

County Councillor Polly English
98 Burnside Avenue
Skipton
North Yorkshire
BD23 2DB

Tel Number: 01756 790287

Email:

cllr.polly.english@northyorks.gov.uk

Please send all correspondence to the above address.

Yours sincerely

for Assistant Chief Executive (Legal and Democratic Services)

Mr Simon Large
Bradford District Care Trust
Trust Headquarters
New Mill
Victoria Road
Saltaire
Shipley
BD18 3LD

CC: County Councillor Polly English



INVESTOR IN PEOPLE

keep north yorkshire thriving

Draft Response to Yorkshire Ambulance Service on its Consultation on Operating as an NHS Foundation Trust

Do you support our plans for the future? Yes

Comments: None

Do you agree with the minimum age of 16 for membership? Yes

Comments: None

Do you agree that the minimum age of governors should be 16? Yes

Comments: None

Do you agree with the proposed public constituencies? Yes

Comments: Yes although we suggest that the proposed North Yorkshire constituency is actually named North Yorkshire and York Constituency.

Do you agree with the split between front-line and support staff? Yes

Comments: None

Do you agree with our proposals for how the Council of Governors will be made up? See comments below.

Comments: We feel that in the consultation document Trust should have been more specific and included supporting rationale with regard to proposals for appointed governors. Which local primary care trusts, local councils, local hospital and mental health trusts and how will they be appointed?

Thinking specifically about local authority representation bearing in mind YAS covers the entire region, we do feel that two is insufficient. We would suggest that there should be a local authority representative for each of the public constituencies and in the case of North Yorkshire and York that should be from North Yorkshire County Council.

We acknowledge that this would increase the total membership up to 26. But we also feel it is important to ensure there is a majority of public governors on the Council of Governors so their membership would need to be increased to at least 14. A final figure would be dependent on the feasibility of allocating 14 across the 4 constituencies on the basis of population.

How do you think we should encourage people to become members and governors?

Comments: The Trust will need to launch a campaign incorporating traditional communication channels such as meetings, briefings and media releases but also incorporating modern social networking sites and pod casts.

Do you have any other comments? See comments below.

Comments: In order to respond to some of our comments above, particularly with regard to ensuring there is appropriate representation from local authorities whilst at the same time maintaining broadly the same proportion of public, staff and appointed governors, it may be necessary to have more than 24 members in total.

Our Plans for Becoming an NHS Foundation Trust

12 September 2011 – 5 December 2011

**HAVE
YOUR
SAY**



You and Your Care

**HAVE
YOUR
SAY**



Our Vision Wheel:

Our vision is to be...

One of the country's leading providers of integrated health and social care services.

Our Vision for the Future

Our plans for becoming an NHS foundation trust



Dee Roscoe
Receptionist



Lisa Lewis (left)
Occupational Therapist
Wasim Mirza (right)
Health Care
Assistant

Our aims

As a provider of choice, we will:

- Provide a high **quality** service
- Make sure we have good **relationships** with you and our partner organisations
- Deliver **value for money** (this means good use of tax payers' money)
- Improve **patient experience**

Our values are:

- Respect
- Openness
- Improvement
- Excellence
- Together

We place 'You and Your Care' at the heart of everything we do.

How we will do it

Our 'Vision Wheel' sets out what we will deliver as a foundation trust over the next five years. It puts 'You and Your Care' at the centre of everything we will achieve. The 'Vision Wheel' describes the type of things we would like to hear you say about our services. We'll know we've achieved our vision when you tell us that we have.

Foundation trust status and the freedom this will bring will allow us to achieve our aims and deliver our vision.

**HAVE
YOUR
SAY**

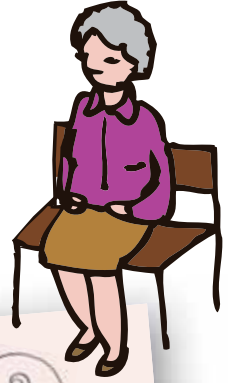
Our Vision for the Future

Our plans for becoming an NHS foundation trust

Can we do it for Doris?

Becoming a foundation trust is the first step in making our vision real for local people. We want to move away from hospital settings and provide care in or near your own home. We want your care to be easier to access and give you more control and choice.

Over the next five years there are lots of things we want to do to make sure we keep improving patient care. Here is just one example of how a patient's experience could be made better in the future...



What sometimes happens now:

- 2011 -

MON

Saw a social worker yesterday and a nurse today - I had to tell them my story all over again. **Why?**



TUE



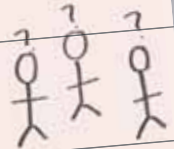
Had to cancel cuppa with Edith! Two different clinic appointments, two different places!

WED

Still finding it hard to remember things. Wonder who I should tell?

THU

Seen so many different people so far this week. Can't remember who they are or what they are going to do.



FRI

More appointments over the next three weeks, all at different places. Feel really tired and anxious, don't feel like meeting Edith.

SAT



Need to decide on treatment options. Not sure I fully understand my choices.

SUN

Have to go into hospital for two days for tests - who will look after Tibbles and my flat?



What will happen
in the future:

2016

MONDAY

Met Mariam, my care co-ordinator today. She could see all my patient records - so no need to explain everything.



TUESDAY

Mariam called. She's arranged for me to see all the experts I need to, on a day that suits me, at a care centre close to home. Met Edith for a cuppa.



WEDNESDAY



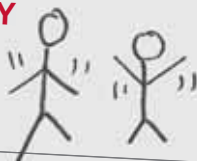
Told Mariam I'm worried I can't remember things. She can help me get the support I need.

THURSDAY

Everyone is working together to help me. All the experts consider my needs at the same time and talk to each other about how they can help me.



FRIDAY



Met Edith. We went to an exercise class for older people - Mariam suggested it. I feel really good!

SATURDAY

Mariam and I talked through my treatment options. I now have enough information to make a decision.



SUNDAY

I need some extra tests. Mariam says these can be done at home. I don't have to worry about leaving my flat or Tibbles!



**HAVE
YOUR
SAY**

Question 1:

Do you agree with our vision and aims for the future?

Where does becoming a Foundation Trust fit in?

Our plans for becoming an NHS foundation trust

**HAVE
YOUR
SAY**

Our membership

By joining us as a member you can help us to achieve our vision and have your say in how we provide the services that matter to you. The more members we have the better placed we will be to respond to local needs.

We have 7,000 local people who have already signed up to become members of our Trust. It's important to us that our members reflect our local communities and we will continue to look for ways to recruit members from any under-represented groups.

We encourage people from 14 upwards to join the Trust as members. As a result, we now have over 1,000 members under the age of 21.

We think it's a good idea to keep the minimum age of membership at 14. However, it won't prevent us from working with younger people. As an organisation that provides children's services, we continue to look for ways to work with children of all ages.



Michael Brimacombe
Occupational Therapist

Categories of membership (Membership Constituencies)

We think it's a good idea to have two categories of membership:

- Public
- Staff

We want to combine the experience and knowledge of our staff with the views and opinions of members of the public all of whom could at one point in their lives have contact with our services.

People can only be members of one category at any time.

Question 2:

Do you agree that the minimum age limit (14 years) for membership is still appropriate?

Question 3:

Do you agree with the membership categories we suggest?

Where does becoming a Foundation Trust fit in?

Our plans for becoming an NHS foundation trust

Council of Governors

The Council of Governors will be elected by its membership. There will also be a number of appointed Governors representing partner organisations. These will include organisations such as the local authority and voluntary sector groups. The Council of Governors will be chaired by the Chair of the Trust. Governors represent the interests of the members and partner organisations, and have a number of legal duties.

We want to encourage people from all the communities we serve to be involved in the Trust as a member or Governor, although there are some legal restrictions. For example, Governors have to be aged 16 years or older.

Members and Governors are not paid, but Governors are entitled to receive expenses in connection with their attendance at Governor related meetings.

To make sure we have strong representation, we propose a total of 26 Governors.

We want our Governors to:

- Communicate messages to the members and the wider public about the work we carry out and to be able to answer basic questions about the work we do.
- Help influence our future plans.
- Work with the Board of Directors on the delivery of its legal duties.

Legal duties of Governors

By law, the Council of Governors' duties include:

- The appointment (or removal) of the Chair of the Trust.
- The appointment of the Non-Executive Directors of the Board of Directors.
- The approval of the appointment of the Chief Executive of the Trust.
- Holding to account the Board and its individual Directors for their performance.
- The approval of the appointment of the Trust's External Auditor.
- To receive and be consulted on the Trust's annual plans.

Governors will also be required to represent the interests of members and will agree any changes to the Trust's Constitution.

The Constitution will outline:

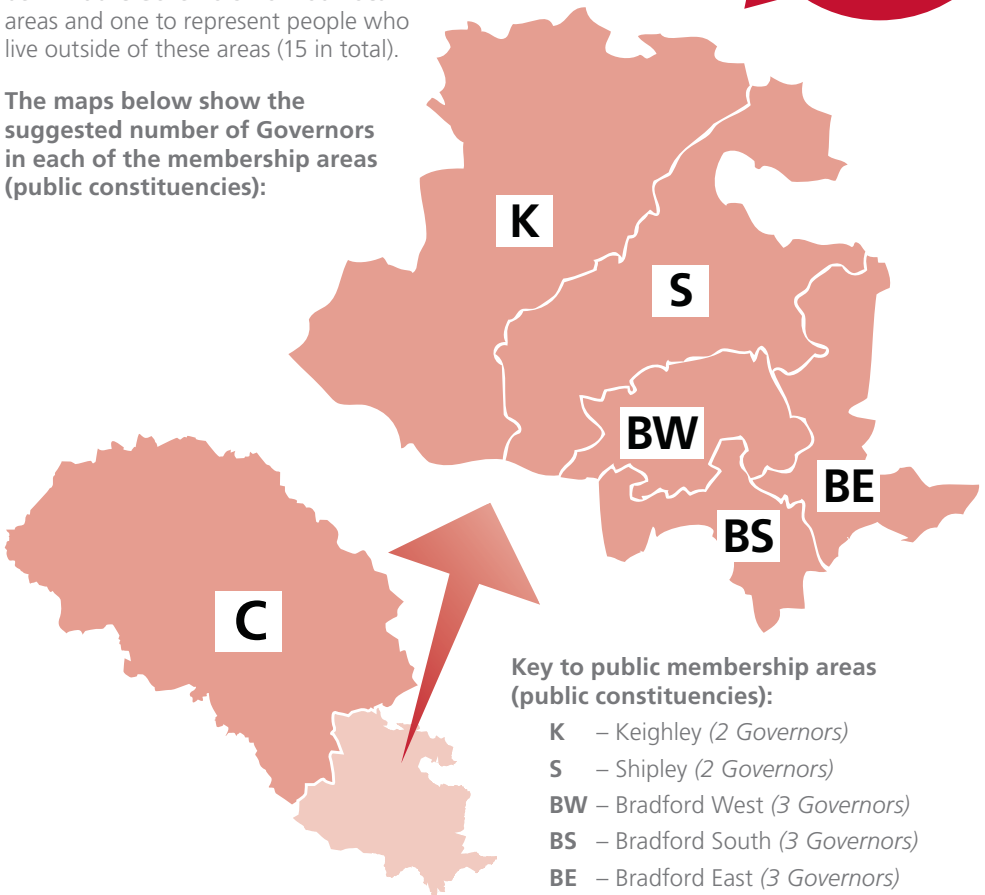
- The powers of the Trust.
- Procedures relating to the recruitment of members.
- Procedures relating to the election and role of Governors.

Governors will be provided with an induction to help them carry out their roles effectively and to determine which other activities they may wish to be involved in.

Public Governors

Members will be grouped depending on where they live. We think there should be 14 Public Governors from our local areas and one to represent people who live outside of these areas (15 in total).

The maps below show the suggested number of Governors in each of the membership areas (public constituencies):



Key to public membership areas (public constituencies):

- K** – Keighley (2 Governors)
- S** – Shipley (2 Governors)
- BW** – Bradford West (3 Governors)
- BS** – Bradford South (3 Governors)
- BE** – Bradford East (3 Governors)
- C** – Craven (1 Governor)

Question 4:

Do you agree with the suggested number of Governors in each of the public membership areas (public constituencies)?

Where does becoming a Foundation Trust fit in?

Our plans for becoming an NHS foundation trust

Staff Governors

We want our staff to be fully involved in our foundation trust and to tell us how they would like services to develop in the future. Our staff are committed to providing the best possible services and we value their input, expertise and knowledge. We know staff want to be involved in the future development of services. On becoming a foundation trust, all staff will automatically become members, unless they choose to opt out.

We think that the staff category should be shared across two staff groups:

- Clinical staff (3 Governors)
- Non-clinical staff (2 Governors)

Question 5:

Do you agree with the suggested number of staff Governors and the proposed staff groups?

Elections

Governors for the public and staff categories (constituencies) will be elected through a voting process. Elections will be by secret ballot and will be run by an independent organisation. Elected Governors are usually appointed for a term of up to three years.

Appointed Governors

The final element of the Council of Governors will be to invite key organisations to become Appointed Governors. We place great value on working together and have close links with many health and social care organisations across the areas we

serve. They will contribute their expertise and knowledge, representing the different needs of the people who use our services.

We think that it would be a good idea to have six Appointed Governors and we would like to invite the following organisations to be Appointed Governors.

- **Bradford University** (1 Governor) – we want to develop our existing links with our local university.
- **City of Bradford Metropolitan District Council** (1 Governor) – we have a legal duty to allocate a place to our local authority.
- **Craven District Council** (1 Governor) – we have a legal duty to allocate a place to our local authority.
- **Sharing Voices, Bradford** (1 Governor) – provides mental health support to black, minority ethnic (BME) communities mostly living in the inner city of Bradford. We want to make the most of links to communicate with our wider communities.
- **Barnardo's** (1 Governor) – provides support and assistance to young people across the district and works with a number of young people that we provide services to.
- **Bradford Community and Voluntary Service** (1 Governor) – represents a wide variety of voluntary/charity organisations across Bradford.

Question 6:

Do you agree with the list of organisations we would like to invite to be Appointed Governors?

Board of Directors

Our Board of Directors is made up of Executive and Non-Executive Directors.

Non-Executive Directors come from outside our Trust to challenge and contribute to our development. They also support and look in detail at the performance of our Executive Directors. They add value through their diverse skills and experience.

Our Executive Directors work from within our Trust and are responsible for all aspects of its day-to-day running. They have specific areas of responsibility and make sure we continue to deliver high quality, effective services.

As a minimum legal requirement, our Board of Directors needs to include:

- Chief Executive
- Finance Director (or equivalent)
- Medical Director (or equivalent)
- Nursing Director (or equivalent)

We think it's a good idea that the Board of Directors includes at least five Executive Directors and the same number of Non-Executive Directors. The Chair of the Board will have a casting vote where necessary.

Question 7:

Do you agree with our suggestion for the Board of Directors?



Joe Maloney
Patient Transport



Jacquie Edwards
Ward Manager



Looking to the future

Our plans to become an NHS Foundation Trust



Consultation document

Yorkshire Ambulance Service



Welcome

Welcome to our consultation document which sets out our plans to become an NHS foundation trust.

This means that we will have members of the public to help us shape the way that we provide and develop our services in the future and bring us closer to the communities we serve.

We hope this document will explain what an NHS foundation trust is and give you the opportunity to get involved by giving us your views and ideas on our plans and future direction.

We intend to highlight the significant benefits of becoming an NHS foundation trust and tell you what we have already done towards this.

We have included a number of questions in this document which we would like you to answer. Please let us have your response by 4 December 2011. We will gather all the responses we receive and include them in a report which we will display on our website so that you can see how they have contributed to our plans.

Whether you are a member of the public, a patient, a member of staff, an NHS colleague or one of our many other stakeholders, we would very much like to hear from you. We also hope that you will choose to become a member of your local ambulance service, the Yorkshire Ambulance Service NHS Foundation Trust.

Find out more about our future plans and consultation at www.yas.nhs.uk/ourfutureplans.

Della Cannings
Chairman

David Whiting
Chief Executive



Profile of Yorkshire Ambulance Service

We provide 24-hour emergency and healthcare services to more than five million people.

- An accident and emergency ambulance service which responds to 999 calls. This includes our communications centres in Wakefield and York where staff arrange the most appropriate response to meet patients' needs, and our ambulance staff who go out to patients and provide immediate clinical care.
- A non-emergency patient transport service which takes patients who are eligible for the service to and from their hospital appointments.
- A private and events service which includes medical cover for football matches, race meetings, concerts, festivals and so on. We also provide ambulance transport for private hospitals, corporations and individuals. You can call the private and events service on 01904 666098.
- A GP out-of-hours service which handles calls to some primary care trusts across Yorkshire and beyond.
- Commercial first-aid training services in our local community, approved by the Health and Safety Executive. We invest any profits we receive from providing these services back into Yorkshire Ambulance Service to improve patient care. For more information, contact our Commercial Training Department (email firstaid@yas.nhs.uk or phone 0114 257 3405).



Did you know?

Our service covers almost 6,000 square miles, from isolated moors and dales to built-up areas, coastline and inner cities.

Patients used our non-emergency patient transport service for over one million journeys in 2010-11.

We employ more than 4,400 staff and have over 3,500 volunteers.

In 2010-11, we received 725,349 emergency and urgent calls (an average of over 1,980 a day) and responded to 615,893 incidents (we categorised 240,347 of these as immediately life-threatening).

The national target is to reach 75% of life-threatening calls within eight minutes. At Yorkshire Ambulance Service we have been making steady improvements in our A&E performance and have been meeting this target.



We are the second largest provider of non-emergency transport in the UK.

Our Patient Transport Service Communications Centre dealt with over 243,000 calls in 2010-11.

We are also measured for the quality of the clinical care we provide to patients with cardiac arrest, asthma, stroke, hypoglycaemia and ST elevation myocardial infarction (STEMI), which is a type of heart attack. We are consistently among the highest-performing ambulance services in these five national clinical performance indicators.

Mission, vision and values

Our mission is as follows:

'Saving lives, caring for you'

Our vision is as follows:

'To provide an ambulance service for Yorkshire which is continuously improving patient care, high performing, always learning and delivers value for money'



Our values are as follows:

Working together for patients

We work with others to give the best care we can

Everyone counts

We act with openness, honesty and integrity - listening to and acting on feedback from patients, staff and partners

Commitment to quality of care

We always give the highest level of clinical care

Always compassionate

Our staff are professional, dedicated and caring

Respect and dignity

We treat everyone with dignity, courtesy and respect

Enhancing and improving lives

We continuously seek out improvements

Our journey

To help us achieve our vision, we have started our journey to become an NHS foundation trust. This will give us more freedom from central government control and will mean that we can make more independent decisions about the way we provide and develop our services. Our 'members' (who will be staff, patients and members of the public) will influence our decisions to make sure they will benefit our local communities.

Our plans for the future

We want to grow and develop our services so that we can continue to provide high-quality patient care. To do this, we need to understand how the healthcare needs of our patients and the population are changing. Whether patients have a life-threatening injury or illness, a complex medical or long-term condition or just a healthcare enquiry about a less serious condition, we need to support them in the right way and provide the right advice and clinical response.



Our priorities

We have identified the following priorities as ways in which we can develop our service to continue to improve over time.

111 number

We have seen calls to our service increase over the years. We know that sometimes people don't need an emergency ambulance, but often they don't know how else to get the help they need.



That is why we plan to support a different option - a 111 number for calls that are less urgent than 999 calls.

This is part of a national programme to make sure there is an alternative to 999. To make this happen for the people of Yorkshire and the Humber, we will be bidding for this service, which is due to start in April 2013.

This will improve access to our services for patients, and also protects the 999 service so that we can get to patients with more serious illnesses and injuries, who need a fast response, more quickly in the future.

**Have your say.
See the
questionnaire
on the inside
back cover**

Major trauma

Major trauma is a serious and life-threatening physical injury which often happens following an accident. Patients need emergency access to a wide range of clinical services and expertise 24 hours a day, seven days a week as getting the right care at the right time is crucial to survival. Our service is the first step for patients who need expert clinical care.

We are committed to working with all areas of the healthcare system to improve the early identification of major trauma, increase our expert emergency clinical response and make the best use of major trauma centres.

We will be placing a senior paramedic in our communications centre to decide which calls are major trauma cases, and will work with trauma clinicians to co-ordinate the most appropriate response. We will be providing skilled doctors and paramedics 24 hours a day, seven days a week with expertise in the treatment major trauma patients receive before they arrive at hospital. Patients will be taken to the designated major trauma centres by road or air ambulance.



Improving clinical outcomes

Over the next five years, we will focus on three main areas which are linked to improving the clinical outcomes for patients who use our service. These are related to patients who have had a stroke, a cardiac arrest or ST elevation myocardial infarction (STEMI), which is a type of heart attack.

We know that it is important to get to patients quickly if they are having a cardiac arrest or STEMI, but we also know that the survival rates for these patients depend on the quality of the care they receive. We have seen improvements in the numbers of patients who survive a cardiac arrest, but we think we can improve this further. Our priorities are to:

- develop our resuscitation training programme for qualified Yorkshire Ambulance Service clinicians
- continue to educate the public in basic life support and increase the number of community first responders who can start to treat patients immediately, particularly in rural areas; and
- continue to support the use of automated external defibrillation devices which can be used by people in the community with limited training. These are used to deliver a shock to the heart of a patient who is in cardiac arrest to try to regain a normal heart rhythm.

Stroke is the single largest cause of disability in adults. Care for people who have had a stroke has significantly improved since 2005, but again we think that we can improve this further. For patients who are having a stroke, it is important to recognise the symptoms quickly, so patients can receive treatment and access specialist stroke centres quickly.

Our priorities are to make sure that our staff and the public are trained to recognise the symptoms of stroke early, as highlighted by the national FAST campaign, and we will work across the healthcare community to make sure we can take patients to the most appropriate treatment centre.

**Do you support
our plans for
the future?**

More about NHS foundation trusts

NHS foundation trusts are a new way of managing the NHS. Each NHS foundation trust will be slightly different in how it is run, but here is a brief guide about these NHS trusts.

1. What are NHS foundation trusts?

NHS foundation trusts are membership organisations that are free from central government control. If NHS foundation trusts make a profit from providing their services, they can invest this back into their services. NHS foundation trusts also have more freedom to borrow for capital projects such as new buildings.

We will need to run our services more efficiently and focus more closely on how we manage our finances. Our income will have to be the same as what we spend or, better still, be a little higher than what we spend so we can use the extra to fund future projects to benefit our patients.

NHS foundation trusts have to deliver on national targets and standards like the rest of the NHS, but they are free to decide how they achieve this. There is an independent regulator called Monitor to protect the public interest.



2. What difference will it make to me if the ambulance service becomes an NHS foundation trust?

By becoming an NHS foundation trust, we will still have to meet national targets for responding to 999 emergency calls and providing high quality clinical standards. We will continue to work in line with NHS principles, but will have more freedom to make our own decisions about how we are run.

You will be able to share your views about the way in which we run our organisation, and we will listen to your ideas on our future plans. You will be helping us to improve our services. We will make decisions locally based on the views of staff and local communities. Following the agreement of our commissioners, we will be able to invest money back into developing local services.

3. Why do you want to be an NHS foundation trust?

Becoming an NHS foundation trust will give us more freedom to decide how to run and deliver services. We also expect to see the following benefits if we become an NHS foundation trust:

- Becoming a membership organisation will develop our approach to listening to our key stakeholders and asking for their views. We will also look for new ways to actively involve people in our decision-making.
- More financial flexibility will allow us to look at wider funding options for our work.

*Have your say.
See the
questionnaire
on the inside
back cover*

4. Are foundation trusts outside the NHS?

No. Foundation trusts are part of the NHS and are committed to its main principles of treating NHS patients, free of charge, in line with their medical needs.

In general, NHS foundation trusts have continued to work with other NHS partners in the best interests of patients. That is what we want to do. They remain part of the public service.

5. Are NHS foundation trusts a way to privatise ambulance services?

No. By law, NHS foundation trusts must use their assets to promote their main purpose which is to provide NHS care to NHS patients - free care based on people's needs, not their ability to pay.

6. Will becoming an NHS foundation trust mean you have more money for services?

The financial situation for all trusts continues to be challenging and we cannot expect to receive extra income simply by becoming an NHS foundation trust. Although we can borrow money to invest, we would need to be able to repay the loan with interest. However, becoming an NHS foundation trust does mean that if we become more efficient and get our strategy right, we will gain money to invest in clinical innovation and better services for patients, which is what we all want.

Planning our services on a five-year cycle will give us more flexibility, but it will also mean we need to be more careful with our money.

7. How are NHS foundation trusts regulated?

As with all other NHS organisations, the Care Quality Commission inspects NHS foundation trusts against national standards and produces a yearly performance rating for each trust. The independent regulator of NHS foundation trusts, Monitor, receives copies of these inspection reports and, if a trust is failing to meet the Care Quality Commission's standards, decides what action is needed.

Monitor's role is to give NHS foundation trusts the freedom they need to meet local needs, while protecting the interests of the public. Normally, Monitor will not need to take any action. However, it does have the power to step in if an NHS foundation trust finds itself in difficulty or is not operating properly.



*Have your say.
See the
questionnaire
on the inside
back cover*

8. Will becoming an NHS foundation trust mean more bureaucracy?

It should mean less bureaucracy. We will no longer be supervised day-to-day by our strategic health authority and the Department of Health. The public interest will be protected by the regulator, Monitor, which will check that we run the services we have to run by law, that our finances are sound, and that we manage ourselves properly. They will be much less concerned with the detailed decisions we make on services.

One of the benefits of becoming an NHS foundation trust is that we will be responsible for our own decisions. We will set up a Council of Governors to represent our members and work with the Board of Directors on our plans for the future. We think talking and listening to our patients and local people is a positive step forward.

9. What happens if you don't become an NHS foundation trust?

The Government has said that all NHS trusts will become NHS foundation trusts, or be part of one. If we are not able to become an NHS foundation trust on our own we will be merged with, or taken over by, an existing NHS foundation trust. This would mean we would lose our independence and the focus of the organisation on providing a quality ambulance service for Yorkshire. We would have to compete for funding and resources with a range of other services in a much larger organisation.



10. What will members do?

Members will work with us to represent their local communities or groups and tell us about their needs. They will be represented by a Council of Governors (some governors will be elected and some will be appointed) which will work with the Board of Directors to influence how we develop and provide services in the future.

Becoming a member of the Trust means you can get involved in the decisions we make and you will have the opportunity to influence the way we develop our services.

We are hoping that our members will include members of the public and our staff. We understand that some people will want to be more involved than others and you will be able to be involved as much or as little as you want.

- We will keep members informed about our organisation and how it is developing.
- Members will tell us about the needs and views of the local community.
- We will discuss our future plans for services with members.
- Members will be able to vote in elections to appoint representatives to the Council of Governors.
- Members will be able to put their name forward for election to serve on the Council of Governors.
- Members will take part in focus groups to help us understand more about important issues such as patients' experiences.



How do you think we should encourage people to become members and governors?

Who can be public members?

Everybody who lives in the Yorkshire area and is over the age of 16 will be able to become a member free of charge. Members will belong to one of four public constituencies depending on where they live.

We want our members to reflect the varied background of the people we serve. This means we will welcome anyone aged 16 and above and from all areas and all backgrounds.

Do you agree with the minimum age of 16 for membership?

Who can be staff members?

All of our permanent employees, and people on contracts of more than 12 months will be eligible to become members. We are proposing an 'opt-out' scheme which means that all eligible staff will automatically become members unless they tell us they do not want to join. Staff will join one of two staff constituencies covering front-line staff and support staff.

Do you agree with the split between front-line and support staff?

Front-line staff will include everyone who provides direct patient care, whether face-to-face or over the phone. This will include all our A&E clinical staff and Patient Transport Service staff working on vehicles and at reception centres. It also covers our phone-based services including staff who take our 999 calls and decide on the most appropriate response to best meet patients' needs. About three-quarters of our staff are classed as front-line staff.

Support staff will include people who work for our fleet and estates departments, finance, IT, administrative support and other services who do not provide direct patient care.

Public constituencies

We are proposing the following four constituencies for members of the public which match the four areas we serve in Yorkshire.

- East Yorkshire
- North Yorkshire
- South Yorkshire
- West Yorkshire

Do you agree with the proposed public constituencies?

Members of the public who want to become members will join the public constituency for their area. They will be able to stand for and represent that area or vote for their governor to represent them on the Council of Governors.



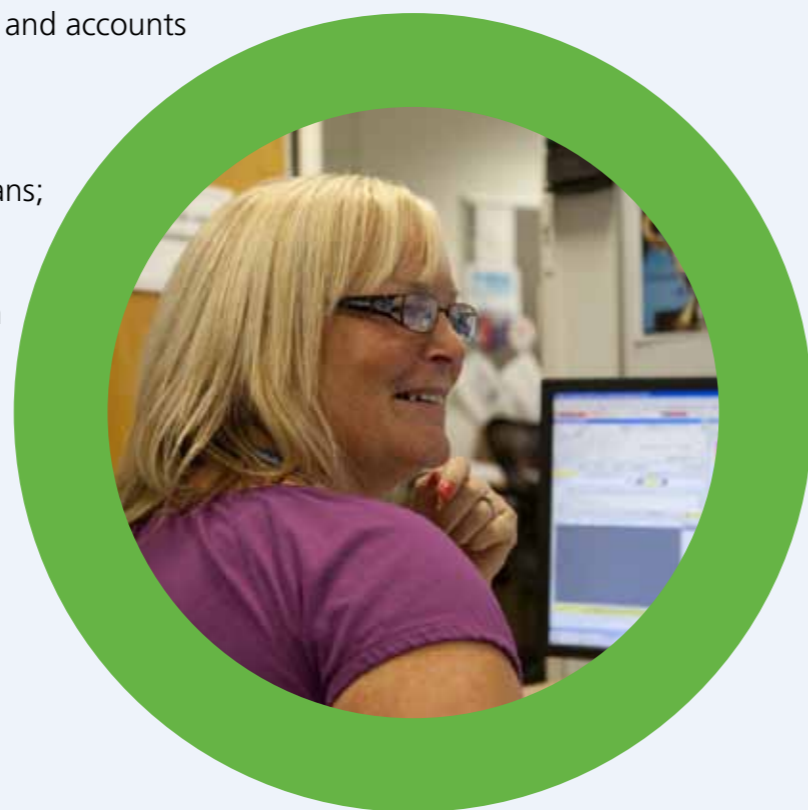
The Council of Governors

Members who join the NHS foundation trust will be able to stand as governors, or elect someone else to be a governor. The governors, along with some governors we appoint, will form the Council of Governors. We believe that if you are old enough and responsible enough to be a member, you should also be able to stand for the Council of Governors, so we are proposing that the minimum age for governors should also be 16.

Anybody who is a member of the NHS foundation trust will be able to stand as a governor, as long as they have never been violent or abusive to NHS staff and are not bankrupt.

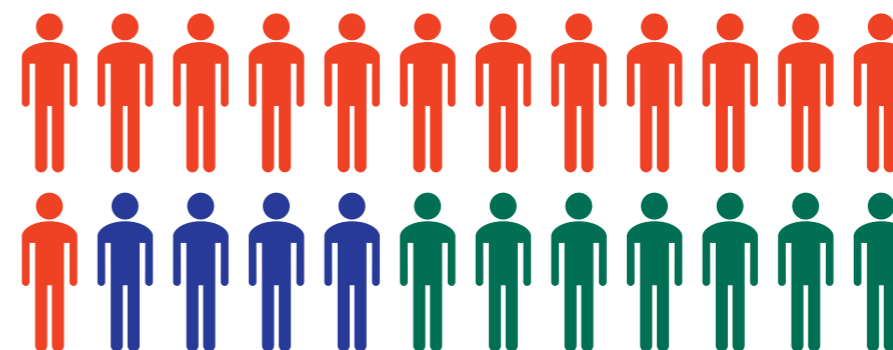
The duties of the Council of Governors include:

- appointing the Chairman and other non-executive directors;
- approving the appointment of the chief executive;
- appointing the auditors;
- considering the annual report and accounts every year;
- being consulted on the development of our future plans; and
- involving local communities in our plans for the future.



Do you agree that the minimum age of governors should be 16?

We propose that the Council of Governors will have 24 members, made up of the following:



Do you agree with our proposals for how the Council of Governors will be made up?

Thirteen public governors

These will be elected by members in the four constituencies - six from West Yorkshire, three from South Yorkshire, two from North Yorkshire and two from East Yorkshire. These numbers reflect the population sizes in the four areas.

Four staff governors

These will be elected by staff - three from front-line staff and one from support staff. Again this is based on the numbers of people in each group.

Seven appointed governors

These will be from organisations that reflect the important day-to-day working relationships that allow us to do our job. Two appointed governors will be from the local primary care trusts, two from local councils, and one each from the local police, a hospital with an emergency department and a local mental health trust. When it is time to invite organisations to appoint these governors, we will keep in mind the need to balance the four areas of Yorkshire and the needs of built-up and rural communities.

The Council of Governors will be chaired by the Chairman of the Trust.

The Board of Directors

The Board of Directors is responsible for the day-to-day management of the Trust and its strategic development, including:

- planning our strategy - vision, values, strategic plans and decisions;
- making sure we take responsibility for our actions and decisions - aiming for excellent performance and high quality services;
- shaping the culture of our organisation - focusing on patients, promoting our values and putting them into practice; and
- working with stakeholders, from both within and outside our organisation, to support delivery of our aims and objectives.

We propose that the Board should be made up of:

- up to seven non-executive directors plus the Chairman; and
- six executive directors including a chief executive and director of finance. One of the six executive directors will have to be a registered doctor and one a registered nurse.

The Council of Governors will appoint the Chairman and the non-executive directors.

The chief executive and other executive directors, who manage the service on a day-to-day basis, will be appointed by the Chairman and the other non-executive directors.

Have your say

There are a number of ways in which you can take part in this consultation process.

You can fill in the short questionnaire opposite and return it to us by 4 December 2011.

Or, you can email your comments to foundationtrust@yas.nhs.uk or visit our website at www.yas.nhs.uk/ourfutureplans and fill in the questionnaire online.

Foundation Trust Consultation
Yorkshire Ambulance Service NHS Trust
Springhill 2
Wakefield 41 Business Park
Brindley Way
Wakefield
WF2 0XQ



1. Please tell us a little about yourself

As part of our consultation we need to record where you live and some information about you. This is to show we are consulting as widely as possible across Yorkshire and the people who live here.

Your postcode:

Date of birth (dd/mm/yyyy):
 / /

Are you: male? female?

Which of the following ethnic groups do you belong to? <i>Please tick one box only.</i>	<input checked="" type="checkbox"/>
White - British	<input type="checkbox"/>
White - Irish	<input type="checkbox"/>
White - other (please give details)	<input type="checkbox"/>
Mixed - white and black African	<input type="checkbox"/>
Mixed - white and Asian	<input type="checkbox"/>
Mixed - other (please give details)	<input type="checkbox"/>
Asian - Indian	<input type="checkbox"/>
Asian - Pakistani	<input type="checkbox"/>
Asian - Bangladeshi	<input type="checkbox"/>
Asian - other (please give details)	<input type="checkbox"/>
Black or black British - Caribbean	<input type="checkbox"/>
Black or black British - African	<input type="checkbox"/>
Black or black British - other	<input type="checkbox"/>
Chinese	<input type="checkbox"/>
Other (please give details)	<input type="checkbox"/>
Which of the following are you?	
A member of the public	<input type="checkbox"/>
A member of staff	<input type="checkbox"/>

If responding on behalf of an organisation (please tell us which organisation):

2. Questions we would like you to consider

Do you support our plans for the future? Yes No

Comments:

Do you agree with the minimum age of 16 for membership? Yes No

Comments:

Do you agree that the minimum age of governors should be 16? Yes No

Comments:

Do you agree with the proposed public constituencies? Yes No

Comments:

Do you agree with the split between front-line and support staff? Yes No

Comments:

Do you agree with our proposals for how the Council of Governors will be made up?

Yes No

Comments:

How do you think we should encourage people to become members and governors?

Comments:

Do you have any other comments? Yes No

Comments:

3. Your chance to become a member

To help make our organisation a strong NHS foundation trust, we need to recruit members from across the area and from all walks of life. You can become part of the NHS foundation trust right now - just fill in your details below and we will do the rest. There are no fees or costs associated with joining.

Would you like to become a member?

Yes No

First name:

Surname:

Address:

Postcode:

Email:

Home phone:

Mobile:

Please tick this box if you do not want your name and constituency to appear on the public register.

We hold information in line with the Data Protection Act. We will not sell or release this information to anybody else. We will only use the information to contact you about our organisation, membership or other health issues, and will store and process it in line with the Data Protection Act 1998.

I apply to be a member of Yorkshire Ambulance Service NHS Trust and agree to keep to the rules of the organisation.

I give you permission to process my information.

Your signature:

Date:

Or, you can register your interest on-line at www.yas.nhs.uk/ourfutureplans and then go to the 'Get Involved' section.

We will be publishing the results of the consultation early in 2012. If you want us to contact you with these, please fill in your details above and tick here.

TEAR HERE



What happens next?

After the consultation is completed in December 2011, we will analyse the results and present the feedback to our Board. The Board will then consider the suggestions and decide if we should make any changes to our plans.

We will publish the results of our public consultation along with any changes we have made as a result.

The consultation will form part of our application to become an NHS foundation trust which will go to the Department of Health in the summer of 2012.

Contact details

Write to:

Foundation Trust Membership Officer
Yorkshire Ambulance Service NHS Trust
Springhill 2, Brindley Way
Wakefield 41 Business Park
Wakefield, West Yorkshire
WF2 0XQ

Phone: 01924 584567

Email: foundationtrust@yas.nhs.uk

Thank you for taking the time to fill in this form. We appreciate your support.

If you would prefer this document in a different format such as another language, in large print, in Braille or on audio tape, please contact our corporate communications department at our headquarters.

Email: corp-comms@yas.nhs.uk

Phone: 0845 124 1241

