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Ymddiriedolaeth GIG  
Gwasanaethau Ambiwylans Cymru  
Welsh Ambulance Services  
NHS Trust

**CONFIRMED MINUTES OF THE OPEN MEETING OF THE WELSH AMBULANCE SERVICES NHS TRUST BOARD, HELD ON THURSDAY 24 MARCH 2016, AT DYFED-POWYS POLICE HEADQUARTERS, LLANGUNNOR, CARMARTHEN, SA31 2PF**

**BOARD MEMBERS**

**PRESENT:**

Mick Giannasi	Chairman of the Board
Tracy Myhill	Chief Executive
Claire Bevan	Director of Quality, Safety and Patient Experience
Emrys Davies	Non Executive Director
Hannah Evans	Director of Planning and Performance (Interim)
Pam Hall	Non Executive Director (Via Webex)
Estelle Hitchon	Director of Partnerships and Engagement
Richard Lee	Director of Operations (Interim)
Dr Brendan Lloyd	Medical Director
James Mycroft	Non Executive Director
Patsy Roseblade	Director of Finance and ICT
David Scott	Non Executive Director
Claire Vaughan	Director of Workforce and Organisational Development (OD)
Martin Woodford	Non Executive Director and Vice Chair

**TRUST BOARD**

**REPRESENTATIVES:**

Leanne Hawker	Partners in Health Care Lead
Nathan Holman	Staff Side Representative (part)
Melfyn Hughes	Welsh Language Officer
Alison Johnstone	Partners in Healthcare Manager
Richard Timothy	Deputy Communications Manager
Steve Owen	Corporate Governance Officer
Bleddyn Roberts	Staff Side Representative (Via Webex)

**APOLOGIES**

Keith Cox	Board Secretary
Geoff Davies	Community Healthcare Representative
Professor Kevin Davies	Non Executive Director

**OBSERVERS**

Peter Adams	Paramedic
Anne Beegan	Wales Audit Office
Helen Bushell	WAST Board Mentee
Andrew Davies	Chair, Abertawe Bro Morgannwg University Health Board
Chris Davies	Chief Fire Officer, Mid and West Wales Fire and Rescue Service
Paul Hollard	Trust Board Non Executive Director designate

Sian-Marie James	Vice Chair, Hywel Dda Health Board
Carwyn Lewis	Trainee Advanced Paramedic Practitioner
David Mackerras	WAST Board Mentee (part)
Pamela Parsons	Community Healthcare Representative
Jill Paterson	Deputy Director of Primary Care, Community, Mental Health and Long Term Care, Hywel Dda Health Board
Linda Williams	County Director & Commissioner for Carmarthenshire

## 21/16 CHAIRMAN WELCOME AND UPDATE

The Chairman welcomed all to the meeting with a reminder that the meeting was being audio recorded and the facility to simultaneously translate from Welsh into English was available. He referred to the Staff Engagement session taking place following completion of Trust Board business which would be the ideal opportunity for staff and stakeholders to share their views and feedback on the issues and challenges currently being experienced by the Trust.

The Chairman drew the Board's attention to the following point advising that there were several items of significance which would be covered in more detail during the Chief Executive's report:

- 1) Challenges being faced by the Trust - The Chairman reminded the Board of the ongoing challenges Trust staff were faced with when carrying out their roles and shared the Board's acknowledgement of the continuing enthusiasm and resilience being shown through these difficult times whilst still meeting the performance targets.

**RESOLVED: That the update be noted.**

## 22/16 CHIEF EXECUTIVE REPORT

The Board received the verbal report of the Chief Executive. The following points were highlighted:

- 1) Extension of Tenure of Chair and Honorary Professorship - The Chief Executive was very pleased to announce that the Chairman of the Board had accepted his extension of tenure which was to run through to 31 March 2018. Furthermore the Chief Executive was delighted to inform the Board that the Chairman had also been appointed as Honorary Professor in the School of Human and Health Sciences at Swansea University for a period of three years effective from 1 February 2016.
- 2) Operational Pressures and Impact on ability to respond - The Board was reminded of the challenges on the whole unscheduled care system constantly being faced by Health Boards and the Trust and the complex nature of them.
  - It was to be acknowledged that responses to red calls whilst deteriorating were still being maintained at target level. The ongoing commitment of staff and the clinical response model were contributory factors to this performance.
  - In terms of releasing ambulances in a timely manner from hospitals, this issue had been escalated on several occasions to Health Boards, the Emergency Ambulance Services Committee (EASC) and Welsh Government (WG) and was an indicator of the system-wide pressures being

- experienced by the Trust
- The impact these pressures were having on staff was starting to be demonstrable and the Board was advised of the numerous measures being taken by the Trust to attempt to reduce it.
- 3) Prevention of Future Deaths Regulation 28 Report -The Board was reminded of the tragic loss of Jasmine Lapsley and reference was made to the report being presented at the Board today following the Coroner's recommendations.
  - 4) Deputy Health Minister's response to the Health and Social Care Committee report - The Chief Executive drew Member's attention to the Deputy Health Minister's encouraging comments which included that he had seen marked progress and a general step-change in ambulance performance.
  - 5) Integrated Medium Term Plan (IMTP) - The Chief Executive recognised the work undertaken in progressing the IMTP to this point and thanked the team involved for their hard efforts.

**RESOLVED: That the update be noted.**

## **23/16 PROCEDURAL MATTERS**

### **Minutes**

The Minutes of the Open and Closed sessions held on 28 January 2016 were confirmed as a correct record subject to, under bullet point nine of Minute 08/16, changing the word understating to understanding.

### **Action Log**

Members discussed the individual actions contained within the Action Log which was updated as required.

### **Trust Seal**

The Director of Finance and ICT provided a brief overview on the use of the Trust seal since the last Board meeting.

### **Chairman and Non Executive Director extension and appointment of Non Executive Director**

The Chairman advised the Board of his extension as Trust Chairman until 31 March 2018, the extension of Mr James Mycroft as Non Executive Director until 31 March 2020 and the appointment of Mr Paul Hollard as Non Executive Director effective from 1 April 2016.

### **Non Executive Director Portfolios**

The Board's attention was drawn to the revised proposed Non Executive Director portfolios which following the imminent appointment of Mr Paul Hollard would be changed. Other very minor amendments to the portfolios were noted and would be rectified immediately.

**RESOLVED: That**

- (1) the standing declaration of Mr Emrys Davies as a retired member of UNITE be noted;
- (2) the Minutes of the Open and Closed session of the Trust Board held on 28 January 2016 be confirmed as a correct record subject to the minor correction as described;
- (3) the adjustments to the action log as referred to be implemented;
- (4) the application of the Trust seal as illustrated in Annex 4 be noted;
- (5) the extension of the appointment of the Chairman Mr Mick Giannasi and Non Executive Director Mr James Mycroft until 31 March 2018 and 31 March 2020 respectively be noted and the appointment of Mr Paul Hollard as Non Executive Director effective from 1 April 2016 be noted; and
- (6) the revised Non Executive Director portfolios be noted and subject to amendments be applied with immediate effect.

#### **24/16 FINAL DRAFT INTEGRATED MEDIUM TERM PLAN (IMTP) 2016/17 – 2019/20**

The Director of Planning and Performance (Interim) reminded the Board of its consideration of the draft IMTP at the January Board meeting, in which certain gaps had been highlighted and that further work would be taken forward prior to the final submission at the end of March 2016. The Director further advised that Welsh Government had reviewed the plan and provided feedback to the Trust through a number of routes, including meetings between Health Board Executives and Welsh Government Officials.

It was noted that a further iteration of the IMTP had been shared at the Trust's Finance and Resources Committee meeting in February with specific focus on the finance, workforce and performance elements within it.

The Director of Planning and Performance (Interim) provided the Board with a presentational format of the IMTP highlighting key areas as follows:

- 1) the overall architecture of the plan
- 2) the purpose vision and behaviours of the Trust
- 3) the strategic aims that would support the Trust in realising its vision going forward
- 4) Service change programmes

The Director of Operations (Interim) presented the Board with an overview of the five steps involved in terms of delivering the new clinical model which were aligned to the clinical and operational strategy going forward:

- Step 1 - Help me choose
- Step 2 - Answer my call
- Step 3 - Come to see me
- Step 4 - Give me treatment
- Step 5 - Take me to hospital

## People Strategy

The Director of Workforce and OD presented the People Strategy element of the IMTP in which the priority was to have an engaged and skilled workforce working together to deliver high quality care. In terms of future roles and responsibilities going forward the Board's attention was drawn to the 'paramedic wheel' which illustrated how the strategy would be implemented.

The Director of Operations (Interim) advised the Board of the 'drivers' that would affect demand and capacity on the service and provided an overview of the Trust's plan in meeting that demand.

## Finance

The Director of Finance and ICT assured the Board there was complete alignment with the details within the IMTP and the budget setting paper.

In terms of the financial plan, the Board were given an overview and the following points were to be noted upon which the Director expanded in further detail:

- Key financial assumptions
- Savings requirement
- Savings plans
- Financial changes over the next three years
- Summary of financial risks

The Chief Executive advised Members that the plan and the assumptions within it had been discussed in detail and in collaboration with the Commissioner. A formal letter of support in terms of the IMTP from the Commissioner had not yet been received but was expected momentarily. Members were informed that the IMTP would be ready for submission in the next few days following some minor changes.

Members deliberated the IMTP in greater detail, acknowledging the hard work of the team involved in the production of the document and raised the following comments and issues:

- 1) tracking the actions within the plan would be a huge undertaking
- 2) the deliverability of the savings plan for next year required expediting
- 3) the issue of working with primary care clusters and how the Trust interacted with them should be addressed going forward
- 4) once the plan had been approved, start and end dates should be incorporated to illustrate percentage completion going forward
- 5) demand and capacity model – consideration should be applied as to whether it would be worthwhile emphasising what level of service pressure had been assumed within the financial section
- 6) had the strengthening to emphasise work by public health been captured adequately?
- 7) partnership working with other Local Health Boards was critical
- 8) how was the Trust responding to the change of type of demand going forward?
- 9) was the Trust increasing its resources to meet the inefficiencies of others?
- 10) was Welsh Government satisfied with the Trust's utilisation in terms of the £8m?
- 11) the Trust should consider further collaboration with the Fire services going forward

The Director of Planning and Performance (Interim) addressed the majority of the issues above and provided the Board with explanations where appropriate giving assurance that

the applicable points raised would be incorporated within the plan. In terms of point 10, the Director of Finance and ICT assured the Board that WG were satisfied.

The Chairman stated it had been disappointing that the letter of support, which would accompany the IMTP to WG, had not been received from EASC at this point. He sought the Board's agreement to submit a letter to the Chair of EASC expressing the Board's frustration to include a request for next year that a more reasonable timeframe be given to the Trust when dealing with the process of submitting the IMTP.

Furthermore the Chairman asked that authority be delegated to him and the Chief Executive empowering them to submit the IMTP to WG following a final quality check.

**RESOLVED: That**

- (1) the Chairman of the Board and the Chief Executive be authorised to submit the final IMTP to Welsh Government on behalf of the Trust Board subject to any minor adjustments emerging from a final quality check and having agreed that the financial assumptions made by the Commissioner on behalf of EASC were reasonable be approved;**
- (2) the areas which have progressed since the draft submission of the plan be noted;**
- (3) the development of a summary plan, once the main document was approved, be noted;**
- (4) it be agreed the Chairman write to the Chair of the Emergency Ambulance Services Committee to express the views as detailed above; and**
- (5) a note of thanks be recorded to the Director of Planning and Performance (Interim) and her team for producing the IMTP.**

**25/16 111 PATHFINDER UPDATE**

The report was presented by the Director of Planning and Performance (Interim) and the following comments were made:

Assurance was provided by the Chair of Abertawe Bro Morgannwg University Health Board that the service would be delivered effectively.

The Director of Planning and Performance (Interim) expected that within the next six weeks the high level risk ratings illustrated as amber would improve.

The Director of Finance and ICT assured the Board that the Clinical Assessment System (CAS), the triage system used in NHS DW, would continue to be used and any replacement would be compatible.

**RESOLVED: That**

- (1) the continued progress of the 111 programme be noted;**
- (2) the critical next steps be noted; and**
- (3) it was intended to report the final governance framework to the Board before**

**the go live date be noted.**

## **26/16 JASMINE LAPSLEY, CORONER'S RECOMMENDATIONS – ACTION PLAN**

The Director of Quality, Safety and Patient Experience presented the report and gave assurance that the Trust was working with partners to ensure the Action Plan was being progressed expeditiously.

The Chief Executive reiterated that the thoughts of the Board remained with Mr and Mrs Lapsley following this tragic event.

In terms of progress, the Director of Operations (Interim) confirmed that additional support and ambulances was being made available for the Easter weekend in rural areas. He also provided further details to the Board in terms of the longer term actions being taken.

The Chairman commented that a collaborative partnership approach should be taken when completing the actions. He added that ownership in terms of the strategic overview of the action plan was to be implemented going forward.

Lessons learned by the Trust would enhance its ability to deal with calls in areas where the population of Wales increased on a seasonal basis was reported by the Chief Executive.

### **RESOLVED: That**

- (1) the Coroner's concerns as set out in the Regulation 28 Report to Prevent Future Deaths be acknowledged;**
- (2) the contents of the Action Plan be agreed and supported subject to there being an overarching strategic overview being in place;**
- (3) the responsibility for ensuring that agreed actions and timescales were achieved by the Lead Director be supported; and**
- (4) the Coroner had received a response by 11 March 2016 be noted.**

## **27/16 TREATING PEOPLE FAIRLY – STRATEGIC EQUALITY PLAN**

The Director of Workforce and OD provided the Board with an overview of the report adding that a note of thanks be recorded for the work undertaken by the Assistant Director of OD and his team in producing the plan.

An outline summary in terms of equality and diversity within the overall NHS was provided by the Chief Executive.

### **RESOLVED: That**

- (1) the publication of the Strategic Equality Objectives and Treating People Fairly (2016-20) be approved;**
- (2) a note of thanks be recorded to the Assistant Director of OD and the team involved in producing the plan; and**

- (3) the issues highlighted within the plan be discussed at a Board Development Session in the near future.

## **28/16 INTEGRATED PERFORMANCE REPORT - JANUARY 2016**

The Director of Planning and Performance (Interim) presented the report and advised that work was being undertaken to ensure the correct level of information was presented at Committees and Trust Board to avoid potential duplication of information.

In terms of 'Handover to Clear', the Director of Operations (Interim) updated Members on the process mapping exercise being embarked on which would provide possible solutions to the current issues.

The Chairman of the Board referred to the discussions in the closed session held earlier whereby the issues surrounding the variation in terms of lost hours at each Health Board had been considered. He further advised that ongoing discussions with Local Health Boards and EASC were committed to solving the issues raised.

The Chief Executive mentioned the Trust's ongoing work in terms of the issues surrounding cross border flow adding that the ongoing capacity and modelling work was designed to address this.

**RESOLVED: That the Integrated Performance report be noted.**

## **29/16 FINANCE REPORT – MONTH 11 2015/16 and BUDGET SETTING**

The Director of Finance and ICT presented the report and drew the Board's attention to the following points:

- 1) the detailed forecasting of £4.411m non recurrent funding subsequently reduced to £3.5m referred to in the report had proven to be accurate
- 2) capital expenditure budget was on target – the Director referred to the recent business cases on the Community First Responder (CFR) hand held devices and defibrillators and confirmed that the equipment had now been delivered

It was agreed that following the meeting, the Director of Finance and ICT would provide an explanation to the Chairman of the Audit Committee into the charitable grants afforded to the CFR scheme with details of the processes involved.

**RESOLVED: That the financial position as reported for Month 11 and the associated key risks and issues be noted.**

## **30/16 BUDGET SETTING**

In presenting the report, the Director of Finance and ICT confirmed that all the figures within the report were entirely consistent with the finance section of the IMTP.

The Director of Finance and ICT referred Members to paragraph 12 of the report which provided details of the ring fenced income from WG.

The Board's attention was drawn to the savings scheme and details on the process involved was provided. The scheme, at this stage, did not include any additional funding for additional developments which may be identified during the year going forward.



The Director of Finance and ICT advised the Board that a sensitivity analysis had been conducted which had considered the level of risk applied to each item within the savings table.

**RESOLVED: That the IMTP financial plan 16-19 and the provision of further detail on the 2016/17 financial year within the paper subject to further consideration of the IMTP be supported.**

### **31/16 DISCRETIONARY CAPITAL FUNDING**

The Director of Finance and ICT presented the report and advised Members that the 50% increase in funding was subject to the IMTP being approved by WG.

The Board were updated and provided with an overview on the processes involved in terms of managing any residual bids.

**RESOLVED: That**

- (1) the competing financial demands placed upon discretionary capital funding by the various projects and organisational priorities be noted;**
- (2) the prioritisation process employed to obtain best value from the resources available be noted;**
- (3) the Programme of prioritised bids was reviewed and supported by FRC on 26 February 2016, and suggested amendments highlighted by the Committee had now been reflected in this updated paper be noted;**
- (4) future outstanding bids be submitted to the FRC and Trust Board be noted;**
- (5) the Internal Planning Group be granted sufficient authority, in line with the Trust's Standing Financial Instructions, to approve the authorisation of any emergency work that should occur during 2016/17 to ensure a swift resolution and appropriate use of slippage be approved; and**
- (6) the Discretionary Capital Programme for 2016/17, and the initial schemes identified be approved.**

### **32/16 WREXHAM AMBULANCE and FIRE JOINT SCHEME**

The Director of Finance and ICT informed the Board the operational go live date for the scheme was planned for 12 April 2016. The scheme had been a huge undertaking following several years of development and planning in which the cost had not exceeded the planned budget.

**RESOLVED: That the update be noted.**

### **33/16 RISK MANAGEMENT STRATEGY & FRAMEWORK 2016/19**

The report was presented by the Director of Quality, Safety and Patient Experience who provided an overview of the overall strategy.

**RESOLVED: That the Risk Management Strategy and Framework 2016/19 with a subsequent review date of October 2016 be approved.**

### **34/16 QUALITY STRATEGY 2016/19**

The Director of Quality, Safety and Patient Experience presented the report and drew the Board's attention to the timelines, key themes and recommendations within the strategy.

The Chairman of the Quality, Patient Experience and Safety Committee commended the work by Jane Palin and her team in producing an excellent piece of work.

**RESOLVED: That**

- (1) the Quality Strategy 2016/19 with the QUeSt Committee receiving assurances regarding implementation and progress on a quarterly basis be approved; and**
- (2) a note of thanks be recorded for Jane Palin and her team in producing the strategy.**

### **35/17 CONSENT ITEMS**

**Minutes of Committees**

- 1) Audit Committee held on 7 January 2016;**
- 2) Finance and Resources Committee (FRC) held on 17 December 2015;**
- 3) Quality, Patient Experience and Safety Committee (QuEST) held on 22 October and 3 December 2015; and**
- 4) The redacted Remuneration Committee held on 12 November 2015.**

**Recruitment and Selection Policy** - The policy was submitted for the Board's approval.

**RESOLVED: That**

- (1) the minutes of the meetings be received and the recommendations within those Minutes be adopted, or noted as items of business on the agenda for this meeting; and**
- (2) the Recruitment and Selection Policy be approved.**

Reports relating to the items of business in these minutes can be found on the Trust's website, [www.ambulance.wales.nhs.uk](http://www.ambulance.wales.nhs.uk)