

DRAFT

ANNEX 1

WELSH AMBULANCE SERVICES NHS TRUST

MINUTES OF THE OPEN MEETING OF THE STRATEGIC PLANNING COMMITTEE HELD ON 20 OCTOBER 2011 AT VANTAGE POINT HOUSE, CWMBRAN.

PRESENT :

Mr D Evans	Non Executive Director and Chairman
Mr S Castledine	Non Executive Director
Mr C James	Director of Service Development
Mr D Jones-Morris	Interim Director of Emergency Medical Services
Mr P Price	Non Executive Director
Mr T Woodhead	Director of Finance

IN ATTENDANCE :

Mr S Fletcher	Trust Board Chairman
Dr P Hughes	Medical Director
Mr N Heal	Staff Side Representative (RCN)
Mr J Huxley	Assistant Corporate Secretary
Mr J Jones	Corporate Accountant
Mr M Jose	Staff Side Representative (UNISON) (Minute 38 onwards)
Ms N Maher	Head of Informatics (Minutes 35-38 only)
Mr G McLean	Unscheduled Care Lead (Minute 39 only)
Mr B Roberts	Staff Side Representative (Unite)
Mrs D Sharp	Corporate Secretary
Ms S Thorpe	Staff Side Representative (GMB)
Mr D Walliker	Head of ICT Operations (Minute 38 only)

APOLOGIES:

Mr D Jackland	Director of ICT
Ms S Jones	Clinical Director
Miss N Park	Non Executive Director

35/11 PROCEDURAL MATTERS

RESOLVED: That

(1) the minutes of the open and closed sessions of the meeting of the Committee held on 6 September 2011 be confirmed as a correct record, subject to an amendment to Minute 33/11 (Open Session) – Finance Report – Month 4 2011/12, in that the final sentence of paragraph three to read as follows:-

“ The Committee requested that the figure in the Lightfoot review be updated internally to reflect the current position in relation to handover delays.”

(2) the report on operational demand be received and it be noted that further information will be provided to the Committee in due course; and

(3) the revised guidance and advice from the Audit Committee in relation to the referral of business for analysis and scrutiny, be noted.

36/11 ‘WORKING TOGETHER FOR SUCCESS’ – ENGAGEMENT AND COMMUNICATION

The Director of Service Development reported that he had given a number of presentations to various groups, both internally and externally, on aspects of the ‘Working Together for Success’ plan. He also confirmed that work was progressing on a Communication and Engagement Strategy which should become available in the next few weeks.

RESOLVED:

That the position be noted.

COMMUNITY FIRST RESPONDER STRATEGY

37/11

The Interim Director of Emergency Medical Services presented a draft Community First Responder (CFR) Strategy for comment before the Trust Board was asked to approve it at its meeting on 8 December 2011.

In considering the strategy, members discussed the costs of operating CFR teams in relation to the level of demand for such services in both urban and rural areas. In general, the strategy was welcomed by members of the Committee, but, inevitably, there were aspects of the operation of CFR schemes which required closer management and further clarity.

RESOLVED:

That the draft NCFRS Strategy, subject to any further comments received, be recommended for approval by the Trust Board on 8 December 2011, acknowledging the ongoing cost/benefit analysis work currently in progress.

38/11 A STRATEGIC PLAN FOR ICT AND HEALTH INFORMATICS 2011-2016 – WORKING TOGETHER : SMARTER

The Trust was seeking to optimise the use of information, communications and technology to support its delivery of services and implementation of 'Working Together for Success'. The Director of Service Development presented a new ICT and Health Informatics Strategy 2011-2016 'Working Together: Working Smarter' in support of these ambitions. The Plan had been through a robust engagement process and all views received had been incorporated into the document before the Committee. The paper covered the key risks to the Trust in implementing the plan, commented on the financial implications at the current stage of development and also mapped out the anticipated engagement and consultation process. The Committee reviewed the document and considered whether to recommend it to the Board for approval. In doing so, reference was made to making sure that the costs of implementing the plan were included in the business case and for them to link to the Trust's capital programme.

RESOLVED:

That the ICT and Health Informatics Strategy 2011-2016, 'Working Together: Working Smarter' be recommend for approval by the Trust Board at its meeting on 8 December 2011.

39/11 DEVELOPING THE ANNUAL DELIVERY PLAN (ADP) 2012/13

The Director of Service Development introduced a paper which began the process of developing an Annual Delivery Plan (ADP) for 2012/13, in addition to an outline set of corporate objectives for that year, to provide high quality services to the public. The paper set out the planning process for 2012/13, explained how a review of 2011/12 performance would form the basis of next year's plan, and would be set in the context of the anticipated challenges or opportunities the Trust would meet in future years.

In terms of the timescale to finalise the ADP for 2012/13, further discussion would be held following the Committee meeting and a further report would be presented to the Committee's next meeting on 15 December 2011. In the new year, the Trust Board would be asked to approve the final version of the ADP at its meeting on 26 January 2012. This timetable would then enable the alignment of objectives arising from the ADP with the budget process for 2012/13.

RESOLVED: That

(1) the expected position against the ADP 2011/12 as at 31 March 2012 be noted;

(2) the issues identified as part of the horizon scanning exercise be noted;

(3) the outline set of corporate objectives for further development be confirmed; and

(4) it be noted that further reports outlining the development of the ADP 2012/13 will be presented to future meetings of the Committee.

40/11 PROGRESS IN DELIVERING THE ANNUAL DELIVERY PLAN (ADP) FOR 2011/12

The Director of Service Development presented a report which set out the key objectives and actions for achievement by the Trust in 2011/12 and provided a progress update up to and including the month of August 2011.

RESOLVED:

That the progress made against the Annual Delivery Plan for 2011/12 be noted.

41/11 FINANCE REPORT - MONTH 6 2011/12

The Director of Finance provided an update on the Trust's cumulative financial performance against budget for the period April to September 2011 and an updated forecast outturn, as reported to the Welsh Government (WG) on 13 October 2011.

The reported outturn performance at Month 6 was an adverse variance against the financial plan for the period of £0.717m or 1.31%. The adverse variance had reduced by £0.07m from Month 5, i.e. in Month 6 the Trust had managed to recover some of the overspend accumulated in the first 5 months.

The report provided detailed information on the current position in relation to pay and non pay expenditure, hospital handovers, income and the financial performance by each Directorate. It also covered the savings plan performance, income assumptions and key risks.

Specific reference was made to the funding arrangements in preparation for the Olympic Games next year. It was reported that, at present, it was not clear what level of funding would be forthcoming for the Trust, although funds had already been devolved to the Health Boards for this purpose. It was suggested that clarity on the funding arrangements was required urgently and the Director of Finance was asked to ascertain the position as soon as possible.

RESOLVED: That

(1) the cumulative financial position as reported for Month six, and the associated key risks and issues be noted; and

(2) the funding arrangements for the Olympic Games next year be clarified urgently, particularly in relation to the level of funding the Trust could expect to cover its costs.

42/11 INTRODUCING THE NEW CLINICAL MODEL

The Trust was required to implement a new clinical response model in order to realise the revised National Ambulance Performance Standards issued by the Welsh

Government (WG) in March 2011.

The Director of Service Development provided information on the state of the current system and identified key learning points arising from an analysis of this system. Using the information from the analysis, the report made a number of recommendations to implement improvements on a two phase process. Phase 1 was to be implemented on 5 December 2011 and the expected benefits arising from the new system were listed in the report; work on phase 2 would commence once phase 1 had been successfully implemented and was consolidated into the clinical model.

It was confirmed that the Trust Board would receive a progress report at its meeting on 8 December 2011 followed by a detailed report at its meeting on 26 January 2012.

Members of the Committee asked a number of questions on the implementation of the model and received re-assurance that all scenario's during the process had been considered and that plans were in place to respond to any problems that might arise.

RESOLVED:

(1) it be noted that improvements to the response model will be introduced in phases;

(2) assurance to the Board regarding progress to implement Phase 1 of the improvements to the response configuration be provided by 5 December 2011; and

(3) it be recognised that further work is required to implement Phase 2 of the clinical model, which will require additional discussions with the WG.

43/11 THE PREPARATION OF THE TRUST FOR THE 2012 OLYMPIC AND PARALYMPIC GAMES

The Committee received an updated report confirming the position with arrangements for the Olympic and Paralympic Games in 2012. In considering the report, it was noted that the recommendations the Committee was being asked to recommend to the Trust Board for approval had already been considered and approved by the Board at its meeting on 29 September 2011.

The main concern from members of the Committee was the lack of clarity surrounding the funding arrangements; this matter had already been raised at the meeting as part of the report on the Trust's current financial position (refer to Minute 41/11). It was also suggested that some activities at the Games carried a higher potential risk than others and that any funding that was received should be channelled into those events which carried the most risk and, conversely, a lower level of funding for those activities with no, or very little, risk.

RESOLVED: That

(1) the Committee's concerns expressed at the present lack of assured funding which could in turn jeopardise the Trust's performance during the period of the Games be conveyed as appropriate in the ongoing discussions being progressed by the Director of Finance; and

- (2) any requirement for the Trust to enter into a Service Level Agreement in this regard be deferred pending the necessary assurances regarding funding.**

RESOLUTION TO MEET IN CLOSED SESSION

Representatives of the press and other members of the public were excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted in accordance with the requirements of Section 1(2) of the Public Bodies (Admissions to Meetings) Act 1960.

Reports relating to the items of business in these minutes can be found on the Trust's website, www.ambulance.wales.nhs.uk