

## WELSH AMBULANCE SERVICES NHS TRUST

### MINUTES OF THE OPEN MEETING OF THE AUDIT COMMITTEE OF THE WELSH AMBULANCE SERVICES NHS TRUST HELD ON TUESDAY 17 SEPTEMBER 2013 AT TRUST HEADQUARTERS, ST ASAPH WITH A VIDEO CONFERENCING LINK TO VANTAGE POINT HOUSE, CWMBRAN, CONWAY HOUSE, SWANSEA AND CEFN COED, SWANSEA

#### PRESENT :

Mr S Castledine	Non Executive Director and Chair
Mr D Evans	Non Executive Director
Dr K Fitzpatrick	Non Executive Director
Mr J Morgan	Non Executive Director

#### IN ATTENDANCE :

Mr M Giannasi	Interim Chairman of the Board
Mrs J Gill	Financial Accountant
Mr D Harries	Internal Audit
Dr P Hughes	Medical Director
Mr J Huxley	Assistant Corporate Secretary
Mr J Jones	Corporate Accountant
Mr O Lotfy	Principal Auditor
Mrs D Sharp	Corporate Secretary
Mrs J Winspear	Head of Concerns and Business Management

#### APOLOGIES:

Mrs V De Zouche	KPMG
Ms V Stephens	KPMG
Mrs P Roseblade	Director of Finance and ICT

#### 18/13 PROCEDURAL MATTERS

The Chairman of the Committee welcomed the newly appointed Interim Chairman of the Trust to the meeting.

In reviewing the Trust's Standing Orders, Standing Financial Instructions and Scheme of Delegation, the Committee, in endorsing the changes to the Terms of Reference of the Committee, acknowledged the need for a fundamental review of the Trust's overall governance arrangements being led by the Interim Chair and Chief Executive Officer and the concept of the direction of travel to delegate further powers to Committees of the

Board. It was acknowledged that these would be taken forward as part of that wider review.

**RESOLVED: That**

**(1) it be noted that there were no declarations made under the Code of Conduct ;**

**(2) the minutes of the meeting (open and closed) of the Committee held on 3 July 2013 be confirmed as a correct record, and the following matters arising from the minutes be actioned:-**

**(a) Executive Director Attendance at Committees - the Chief Executive to discuss with all Directors the importance of attending all meetings of Committees, as appropriate, particularly when there is a specific request to provide further advice and information;**

**(b) Minute 15/13 (Open session) – Medical Device Management**

**In the absence of an agreed job description for the Medical Devices Manager post, this matter be included on the Committee's Action Log for review of progress at the next meeting.**

**(c) Minute 17/13 (Open session) – Unsocial Hours Payments for NHS Direct Wales Staff on Sick or Annual Leave**

**The Director of Workforce and OD to circulate to members as soon as possible an estimated cost of the enhancement paid to NHSDW staff calculated on the basis of a sample of cases multiplied by the number of staff affected to produce an estimated total.**

**(d) Use of Skype at Meetings – the Director of Finance and ICT to confirm that NWIS have been asked to produce a report explaining the technical considerations and criteria covering the use of Skype for meetings, particularly when discussions of a confidential nature are being held, and to circulate the report to Committee members as soon as it is received before the next Committee meeting.**

**(3) following consideration of the feedback from the self assessment checklist, members agreed to include future discussion on any changes to the current practice of the Committee in the wider deliberations on the**

**Board/Committee structure which were to be progressed in the near future;**

**(4) the introduction of the Audit Tracker tool, as presented to the Committee, be welcomed and the Chief Executive be asked to ensure that each Director updates the tool in time for it to be considered at each meeting of the Committee;**

**(5) the Trust Board be recommended to note and approve:**

**(a) the Trust's SO's, SFI's and the changes to the SORD with regard to the finalisation of Executive portfolios due to be considered by the Remuneration Committee who were to make a recommendation direct to the Board given the timescales; and**

**(b) the revised terms of reference of the Quality, Safety and Governance, the Strategic Planning Committees and the Welsh Ambulance Service Partnership Forum (WASPF) and that consideration be given to Non Executive Director attendance as an observer at meetings of the WASPF;**

**(c) the Terms of Reference of the Committee, subject to the deletion of the words "Consultant Paramedic" from the "In Attendance" section in paragraph 4.2**

**(6) consideration of the schedule of payments received by Trust Board members for 2012/13 be deferred until the next meeting of the Committee to be held on 20 November 2013;**

**(7) the Trust Board be recommended to approve the Trust's Annual Report for 2012/13, including the Annual Quality Statement which is an integral part of the Report, but approval be sought under the Chairman's urgent action procedure in order to publish the documents in line with the timescale for dispatch of Board papers for the Annual Meeting;**

**(8) the draft minute outlining the discussions held at the meeting of the Strategic Planning Committee on 5 September 2013 relating to financial matters, be noted and acknowledging that it may be necessary to hold a special meeting of the Board to discuss in detail the Trust's financial position in detail;**

**(9) the position with regard to the preparation of a Meal Break Policy be noted and the Management Team be urged to move quickly to appoint a suitably skilled and experienced Datix administrator to improve the management of follow up**

**actions and to oversee access/data cleansing of the system;  
and**

**(10) the current version of the Annual Business Plan for the  
Committee for 2013/14 be noted.**

**19/13 EXTERNAL AUDIT PROGRESS REPORT**

**RESOLVED: That the progress report be received.**

**20/13 SERVICE LEVEL AGREEMENTS (SLA's)**

**(a) Air Ambulance SLA**

The Corporate Accountant reported that the Air Ambulance SLA had been considered by the Management Team and that there were issues still to be clarified in relation to the scope of practice and working patterns. The Medical Director also informed the Committee that other issues to be resolved related to the clinical relationship between the charity and the Trust, and also matters of a corporate governance nature.

Members were anxious to know when the SLA would be finalised and received confirmation from the Medical Director of the work in progress. Members noted the complexities surrounding the matter but emphasised that importance of concluding the matter. It was anticipated that the SLA would be finalised before the end of the calendar year.

**RESOLVED:**

**That the position be noted and progress continue with a view  
to finalising the SLA before the end of the calendar year.**

**(b) Patient Care Services (PCS)**

Members were informed that the SLAs for each Health Board were in the process of being signed off and that five of the seven Health Boards had returned the documentation. The Committee was advised that these SLA's would contain significant clinical considerations and therefore there was a role for the Quality, Safety and Governance Committee in ensuring that the clinical issues were satisfied. It was also important to note that the agreements would have to be revised to reflect the work currently being undertaken around PCS following the Ministerial Review statement in July. Members also were of the opinion that Strategic Planning Committee should be sighted on the contract.

## **RESOLVED:**

**That a copy of the standard PCS SLA, covering the service to be provided and the income to be received, be circulated to all members of the Board and that the Chairman of the Quality, Safety and Governance and Strategic Planning Committees determine appropriate reporting arrangements to their respective Committees.**

## **21/13 CLINICAL AUDIT EFFECTIVENESS PROGRAMME**

In presenting the Clinical Audit Effectiveness Programme, the Medical Director gave a presentation which demonstrated that the Trust had a good foundation with regard to clinical audit but it was now necessary to improve the function to the next level.

Reference was made to ten rules which were widely regarded as the core principles underpinning clinical audit effectiveness.

Clinical audit was fundamental for the Trust in order to demonstrate that it held the evidence that it had learned the lessons flowing from the clinical audit process and that quality and performance had improved as a result. It was suggested that in order for clinical audit to function effectively, it was important that resourcing levels were adequate and the Trust could demonstrate that it was making a difference and saving lives.

## **RESOLVED:**

**That the forthcoming workshops to be held to look in detail at the Clinical Strategy also include consideration of the Trust's clinical audit arrangements, including the resourcing issues, and both of these matters be included in discussions about the programme of topics for future Board Development days.**

## **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.*

**NOTE: Reports supporting the information contained in these minutes can be found on the Trust's website: [www.ambulance.wales.nhs.uk](http://www.ambulance.wales.nhs.uk)**