

DRAFT

WELSH AMBULANCE SERVICES NHS TRUST

**MINUTES OF THE CLOSED MEETING OF THE STRATEGIC PLANNING
COMMITTEE OF THE WELSH AMBULANCE SERVICES NHS TRUST HELD
ON 5 JULY 2012 AT VANTAGE POINT HOUSE, CWMBRAN AND VIDEO
CONFERENCING LINK FROM ST ASAPH AND SWANSEA**

PRESENT :

Mr P James	Non Executive Director (Chair)
Mr S Castledine	Non Executive Director
Mr D Evans	Non Executive Director
Mr C James	Director of Strategy, Planning and Performance
Mr J Jones	Interim Director of Finance and ICT
Mr P Price	Non Executive Director

IN ATTENDANCE :

Mr A Ashforth	Acting Corporate Accountant
Mr G Bryce*	Programme Manager
Mrs A Evans*	Assistant Nurse Director
Dr K Fitzpatrick**	Non Executive Director
Ms A Flegg*	PCS Modernisation Project Lead
Mr S Fletcher*	Non Executive Director and Chairman of the Board
Mr N Holman*	Staffside Representative (GMB)
Mr J Huxley	Assistant Corporate Secretary
Mr M Jose	Staffside Representative (UNISON)
Mr J Moore*	Assistant Director, Organisational Design and Development
Mr J Morgan*	Non Executive Director
Mr E Price-Morris*	Chief Executive
Mrs D Sharp	Corporate Secretary
Mr R Wilkins*	Programme Director

APOLOGIES:

Mr N Heal	Staffside Representative (RCN)
Mrs S Jenkins	Director of Service Delivery

*Not present for whole meeting

**Linked to meeting by telephone

23/12 PROCEDURAL MATTERS

RESOLVED: That it be noted that there were no declarations made under the Code of Conduct.

24/12 A DRAFT OUTLINE BUSINESS CASE FOR THE PURCHASE OF AN ELECTRONIC CLINICAL RECORD (ECR)

A report was presented to the Committee seeking approval to submit the Business Case for an ECR system to the Welsh Government (WG) for consideration. The elements of the business case had been discussed in various meetings of the Board and Committees on previous occasions.

The need for an ECR was clear although further work was necessary to establish what kind of system was required highlighting what the cost benefit considerations were to ensure that the project would demonstrate value for money. It was suggested that further development work was necessary to broaden the scope of the project and to couple it with other complimentary developments eg digital pen, to be worked up into a substantial programme.

RESOLVED: That

(1) the current ECR Business Case be noted as a statement of the position reached so far and that further work be undertaken to develop further the analysis of the possible cost benefits from purchasing an ECR system as this will strengthen the case for funding; and

(2) the work referred to in (1) above include the feasibility, in broad terms, of encapsulating the work around the use of a digital pen, and other ways, which will contribute to the overall strategic direction of travel in the long term, whilst focussing on staff and patient benefits.

25/12 TRI-SERVICE CONTROL

The Director of Strategy, Planning and Performance provided the Committee with an oral update regarding tri-service control options for North Wales and the detailed evaluation was currently being undertaken with regard to co-location versus total integration. It was anticipated that work relating to the evaluation documentation would be completed by the end of July. Should a tri-service option not materialise, the Committee would wish that a stand-alone facility for North Wales then be planned.

RESOLVED:

That the update on the current position with the Tri-service Control discussions by the Director of Strategy, Planning and Performance be noted.

26/12 2012/13 FUNDING : A RESPONSE TO THE PLANNING ASSUMPTIONS PROVIDED BY THE WELSH HEALTH SPECIALISED SERVICES COMMITTEE (WHSSC)

The Committee received a full appraisal of the position following extensive discussions on the funding available from the WHSSC for the Trust.

At previous meetings, the Board had instructed the Executive Team to finalise the situation by 30 June 2012 and it was reported that no such formal agreement was in place. Therefore, the Committee's deliberations and subsequent recommendations at this meeting were based on the assumption that no agreement would be reached by the time the Trust Board was due to meet on 26 July 2012. At the Board meeting later in the month, the outcome of further discussions would be reported including clear recommendations from the Executive Team as to what action should be taken.

The Trust had received an indication as to how WHSSC wished to proceed and this was carefully considered by the Committee following advice from the Executives present. The use of arbitration to resolve the situation should it not be finalised in the next few weeks was discussed but the Committee considered this inappropriate in the circumstances. However, the options available to the Trust were still fluid and could only be crystallised once a number of stages in the negotiations had been completed.

The Committee advised the Executive Team to provide to the Board on 26 July clear and precise recommendations as to what action should be taken, to ensure that the Trust did not spend more than it was to receive, and to clarify the consequences of taking this action.

RESOLVED: That the Board be advised as follows:-

(1) to reject the offer from the WHSSC as stated in the report and discussed by the Committee;

(2) the Chief Executive circulate the response from the Trust to the WHSSC to all Non Executive Directors; and

(3) subject to the progress made following further negotiations/discussions with the WHSSC, a report be presented to the Board meeting on 26 July 2012 clarifying the current position and setting out what action, including the consequences, the Executive Team will take should the position with the WHSSC not be resolved, in order to ensure that the Trust is on track to achieve a break-even financial position at the end of the current financial year.

27/12 PATIENT CARE SERVICES (PCS) – ABORTED JOURNEYS

Following an update to the previous meeting of the Committee on the aborted

activity within the Patient Care Services, a further report was requested by the Committee to provide information on the rate of aborted journeys in relation to the mobility categories of patients; this information was provided in a report presented by the PCS Modernisation Project Lead

RESOLVED: That

- (1) the report be noted; and**
- (2) a further report be submitted confirming the feasibility of automating the cancellation of pre-booked transport and identifying the frequency of aborted journeys from individual addresses.**

28/12 WREXHAM AMBULANCE RESOURCE CENTRE

RESOLVED: That the comprehensive update on the Wrexham Ambulance and Fire Service Resource Centre project, be received.

27/12 HAZARDOUS AREA RESPONSE TEAM (HART) – UPDATE

RESOLVED:

That the progress made in implementing the HART project be noted.