

## WELSH AMBULANCE SERVICES NHS TRUST

### CONFIRMED MINUTES OF THE OPEN SESSION OF THE MEETING OF THE FINANCE AND RESOURCES COMMITTEE HELD ON 26 FEBRUARY 2016 AT VANTAGE POINT HOUSE, CWMBRAN AND VIA VIDEO CONFERENCING AT HEADQUARTERS ST ASAPH

#### PRESENT :

Martin Woodford	Non Executive Director and Chair	<b>MW</b>
Emrys Davies	Non Executive Director	<b>ED</b>
Professor Kevin Davies	Non Executive Director	<b>KD</b>
Pam Hall	Non Executive Director (VC, St Asaph)	<b>PH</b>
James Mycroft	Non Executive Director (Part)	<b>JM</b>
David Scott	Non Executive Director (VC, St Asaph)	<b>DS</b>

#### DIRECTORS:

Hannah Evans	Director of Planning and Performance (Interim)	<b>HE</b>
Richard Lee	Director of Operations (Interim) (Part)	<b>RL</b>
Claire Vaughan	Director of Workforce and OD	<b>CV</b>

#### IN ATTENDANCE:

Jason Collins	Finance Manager	<b>JC</b>
Gwen Kohler	Financial Planning Manager	<b>GK</b>
Caroline Mitfari	Service Development Manager (Part)	<b>CM</b>
Nick Morgan	Staff Side Representative	<b>NM</b>
Steve Owen	Corporate Governance Officer (VC, St Asaph)	<b>SO</b>
Chris Turley	Deputy Director of Finance	<b>CT</b>

#### APOLOGIES

Keith Cox	Board Secretary
Nathan Holman	Staff Side Representative
Patsy Roseblade	Director of Finance and ICT

#### 01/16 PROCEDURAL MATTERS

The Chairman welcomed all to the meeting and reminded those in attendance that the meeting was being audio recorded. The Committee were advised of the declaration of interest of Mr Emrys Davies, Non Executive Director as being a former member of UNITE.

## **Minutes**

The Minutes of the Committee held on 17 December 2015 were confirmed as a correct record.

## **Action Log**

The Committee referred to the Action Log and the followings issues were raised/commented upon:

Action number 1. The Director of Planning and Performance (Interim), **HE** provided an update and advised the Committee of the ongoing work in terms of process mapping. The Committee held a detailed discussion with regard to the issues surrounding handover delays and the handover to clear delays at hospital.

Following the discussion it was agreed that a performance improvement plan in terms of handover to clear be produced and circulated to the Committee by the end of March 2016.

Actions to add:

Vehicle replacement Standing Operating Procedure - Report to be presented at next meeting.

Meal Breaks performance to be included within the IPR.

### **RESOLVED: That**

- (1) Mr Emrys Davies, Non Executive Director declared an interest as a former member of UNITE;**
- (2) the Minutes of the Open and Closed sessions of the meeting held on 17 December 2015 be confirmed as a correct record; and**
- (3) the actions within the Action Log were considered by the Committee and modifications were implemented as shown above.**

## **02/16 INTEGRATED MEDIUM TERM PLAN 2016/17 – 2018/19**

The Director of Planning and Performance (Interim) **HE**, advised the Committee of the work undertaken and the process followed thus far in seeking Welsh Government approval of the IMTP. **HE** informed the Committee that a draft plan had been submitted to the Commissioner and there had been positive feedback.

The Director of Workforce and OD **CV**, provided the Committee with an overview of the key elements of the workforce plan and how the Trust proposed the delivery of its strategic aims and ambitions with regard to the planning, recruiting training and retaining of people going forward. The delivery of this plan would be underpinned by several enabling plans which the Committee were asked to consider and provide support. **CV** advised the Committee of the challenges involved in taking this plan forward. Members were asked to consider and reflect upon the people strategy and to be mindful of the workforce targets as set out in the IMTP.

**CV** briefed the Committee on EMS staff turnover and recruitment and how that impacted upon the Trust in terms of its establishment numbers required going forward.

**CV** provided the Committee with a brief overview in terms of why demand for the service was increasing and the plans the Trust was implementing to alleviate this matter.

Furthermore, **CV** informed the Committee of the proposals to improve efficiency and productivity which included:

- 1) the need to reduce sickness
- 2) to realign the existing CPD hours to be done 'on the job'
- 3) minimise vacant posts
- 4) tackle variation within performance
- 5) building adequate relief capacity into rosters
- 6) reviewing skill mix
- 7) over recruiting to reduce overtime/private provider usage

Members were advised by **CV** that the demand and capacity work would be completed by June 2016 and following that, by September the Trust would know what the plans were and what impact that had on the overall shape of the workforce.

The following comments were raised by Members:

- 1) the Trust would need to consider the consequences on the IMTP should the demand and capacity work not be completed as stated. **HE** explained that planning was a continual process and the three year plan was updated on an annual basis
- 2) Optima software, was there any update? This could not be answered effectively at the meeting.
- 3) staff side involvement, **CV** advised that they were involved from a 'bottom up' engagement perspective. **NM** commented that within the Clinical Contact Centre (CCC) there had been more involvement recently.
- 4) did the Trust recognise the implications of staff leaving the ambulance service to work in other areas such as primary care. **CV** advised that the Trust was aware of the issue and assured the Committee that work was being undertaken to mitigate it. **RL** provided the Committee with an overview in terms of the collaboration models and the different solutions in place for different areas.

The Chairman and Committee were in full support of the plan going forward welcoming its logical and coherent design.

## **Finance plan**

The Deputy Director of Finance **CT**, presented the Committee with a detailed presentation of the Finance plan and the key financial planning assumptions drawing attention to the following key areas:

- 1) described the factors within the IMTP which had resulted in a gross financial gap/challenge for 2016/17 of circa £6.2m

- 2) progress since the submission of the January IMTP submission
- 3) cost avoidance potential to reduce inflationary and other cost pressures for 2016/17
- 4) the workforce planning and variable costs was being focused on
- 5) outstanding key risks
- 6) update on commissioner feedback

The Director of Planning and Performance (Interim) **HE**, advised that confirmation of funding would not be forthcoming until the plan had been approved.

Members held an in depth discussion which raised several issues and comments:

- 1) concern was expressed in terms of meeting the savings target
- 2) in terms of the Cwm Taf pilot going forward, **CT** informed the Committee that it had been assumed this would be funded
- 3) how did the Trust approach investigations into efficiencies and where would it see the best return in priority order, for example the issue of handover to clear. **RL** advised how the Trust intended to use process mapping of the job cycle which would tease out efficiency opportunities, especially in areas such as handover to clear/handover delays which were being supported by Welsh Government. Furthermore the Committee speculated on how the Trust could systematically capture the efficiency opportunities and the benchmarking analysis which would naturally follow.
- 4) whilst the Trust must consider, in terms of savings, the 'big ticket' items it should not lose its focus on the smaller saving schemes going forward.

### **Performance Ambition**

The Director of Planning and Performance (Interim) **HE**, presented the Committee with an overview in terms of the Trust's performance ambitions and advised that there were still some areas that were being developed further going forward. In terms of the strategic aims, **HE** informed the Committee of the process involved in determining these and how they were being implemented.

Members raised the following points:

- 1) the detail within the plan was very comprehensive
- 2) were the ambitions achievable and affordable, and how many were target based as distinct from local aspirations? – **HE** advised they were a mixture of the two and were considered to be realistic. **RL** further advised that it would be useful to glean information from amongst others, key national working groups and collate their collective expertise.
- 3) the impact of the new CAD, were there other benefits to be reflected within the plan. **HE** agreed to reconsider and address this.

- 4) the Committee held a very detailed discussion on the target for PADR's which was currently set at 85%. The debate brought forward suggestions which ranged from setting the target at 100% by exception and to benchmark with other health boards. **CV** agreed to look into the possibility of working out on a percentage basis, what the expected exceptions were and to set a target based on the results of that work.

In terms of red performance and the 65% target, the Committee discussed this at length and agreed that this should be considered as a minimum target and the Trust should strive to deliver further improvement.

The Chairman supported the comments stated, and understood clearly the challenges being faced by the Trust. The Committee supported the performance ambitions, however, going forward it was to be borne in mind the scale of the challenge and the financial implications which would need to be reviewed. In terms of vehicle cleaning, it was questioned whether the Trust was being ambitious enough with its target and this would need revisiting at some point. Further pathways would be delivered over the next three years going forward and would there be metrics that would measure these in terms of the amber and green calls.

**RESOLVED: That the progress on the development of the performance ambitions be noted.**

#### **03/16 DISCRETIONARY CAPITAL**

The Deputy Director of Finance **CT**, presented the report advising the Committee of the current position adding that it was a fluid document and further iterations would be made throughout the year. **CT** reminded the Committee of the process involved for the submission of capital bids adding that further staff training was still required to ensure clarity and consistency going forward.

**CT** agreed to further investigate Bid number 1034, the upgrade of cisco servers, and advise the Committee of his findings in due course.

**RESOLVED: That**

- (1) the business cases be approved against unallocated funding within the 2016/17 discretionary capital programme; and**
- (2) the Internal Capital Planning Group (ICPG) be granted sufficient authority, subject to further scrutiny to approve the authorisation of any emergency work that should occur during 2016/17 to ensure swift resolution prior to submission to the Trust Board.**

#### **04/16 INTEGRATED PERFORMANCE REPORT (IPR) – December 2015**

The Director of Planning and Performance (Interim), **HE** presented the December IPR report to the Committee. Attention was drawn to the ongoing work involved in terms of the actions being taken to improve performance and **HE** referred to the performance management framework.

**HE** drew the Committee's attention to the range of factors which were impacting on

performance and how the Trust were implementing measures to address these issue.

The Committee discussed the IPR in further detail and the following issues and comments were raised:

- 1) An update was provided on the recruitment of personnel for the CCC
- 2) In terms of the calls made by police, it was the Committee's understanding that crews responded to all these calls and questioned why a proportion of them could not be dealt with using 'Hear and Treat'. Was there an initiative to address this issue? **HE** and **CB** advised that ongoing work had been implemented which was designed to look into this issue of capacity and demand within the CCC.
- 3) Clarity was sought in terms of the graph at the top of page 22 in the IPR. **HE** advised that going forward, graphs would be produced in a more standardised format.
- 4) What were the procedures to update address flags on the CAD system? At this present time there was insufficient dedicated resource to monitor and manage the issue, however the Committee's attention was drawn to the Health Informatics update which referred to the flagged addresses.
- 5) Page 24, referred to the number of missed red calls being investigated but none had been 'blue lighted' to hospital. **CV** explained that this particular issue should be resolved once the new CAD was in place.
- 6) Page 12, Project RAG Status of Digipen was red, why was this the case. **PH** advised that this was due to technical issues during the validation process of the data.
- 7) **PH** drew the Committee's attention to the Data Sharing Project which was an ambition being driven by Welsh Government and would be a process of linking collected patient data with the Trust and hospitals which would enable the Trust to track patient outcomes. It was queried whether a Data Sharing Agreement was adequate in terms of the legal requirement with regard to sharing patient identifiable information and PH would raise this with the Head of Health Informatics.

### **ICT Service Delivery - KPI**

The report was presented by the Chairman as read and Members raised the following comments:

- 1) In terms of the Open Call Summary – the level in breach had increased significantly and an explanation was sought as to why this was the case.

### **RESOLVED: That**

- (1) the December 2015 Integrated Performance Report be noted;**
- (2) an update be provided at the next meeting into the work being carried out to better manage the calls being made by the police;**

**(3) the Head of ICT be requested to consider the level of breach increase and provide an explanation by the next meeting.**

## **05/16 FINANCE REPORT – MONTH 10 2015/16**

The Deputy Director of Finance presented the Committee with the financial performance of the Trust as at Month 10 (January) as read and reported that the Trust's year end forecasted position would report a small surplus. The reported outturn performance for the year to date was a surplus of £0.092m.

The Committee discussed the financial situation in further detail and raised several issues/points which included:

In terms of savings the Committee noted the Trust's increased reliance on non-recurrent savings as a percentage of the total. **CT** agreed that the savings plan should be realistic and provided an explanation into how the surplus was used.

**RESOLVED: That the financial position as reported for Month 10 and the associated key risks and issues be noted.**

## **06/16 WORKFORCE PERFORMANCE REPORT**

The Director of Workforce and OD, **CV** presented the report as read.

### **Sickness**

**CV** drew the Committee's attention to the fact that the number of staff reporting sick was decreasing further advising that the 1.5% reduction target had been met.

In terms of the issues surrounding sickness within the CCC **CV** advised the Committee that plans were in place to address the issues and provided details of the work being undertaken which would consider amongst other things, health and wellbeing of the staff. **CV** also provided the Committee with details of the recruitment process within the CCC.

**CV** advised that the Trust had been liaising with the West Midland Ambulance Service and had been using their approach, methods and best practise in monitoring sickness as a benchmark going forward.

### **Personal Appraisal Development Reviews**

**CV** reminded the Committee that the Trust was focussing on achieving a target of 85% with staff receiving a good quality report by the end of March 2016, however, this was now looking less likely. Notwithstanding this, the Committee applauded the progress made to date. Members held a detailed discussion which centered upon the benefits and the value of all staff receiving a timely and quality report. The Chairman referred to the Internal Audit review and the moderate assurance being given which was linked to the ability to reach the target, and advised that he would update the Audit Committee at its next meeting.

### **Statutory Mandatory Training and Continuing Professional Development (CPD)**

**CV** provided a brief overview of the Trust's position which had improved greatly from the previous year and added that CPD was being driven by the Serious Adverse Incidents reported to the Trust and the learning taken from them going forward.

## **Recruitment**

The Committee were informed by **CV** of the national shortage of ambulance staff, in particular paramedics, and gave details of the work being undertaken to promote and recruit graduates into Wales.

### **RESOLVED: That**

- (1) the current performance against Workforce and OD Key Performance Indicators be received and noted; and**
- (2) the progress of the Trust's People Programme of work be received and noted.**

## **07/16 RISK MANAGEMENT STRATEGY AND FRAMEWORK 2016/19**

The Service Development Manager **CM**, presented the report as read providing the Committee with background information as to how and why the strategy and framework were being implemented and developed. The Committee were provided with details in terms of how the risks were going to be monitored and managed going forward.

**RESOLVED: That the submission of the Risk Management Strategy and Framework 2016/19 to the Trust Board for approval in March 2016 with a subsequent October 2016 review date be approved.**

## **08/16 RECRUITMENT AND SELECTION POLICY**

The Director of Workforce and OD drew the Committee's attention to the policy and advised of the changes following the last meeting.

Members discussed the policy in further detail and raised several issues which were addressed by the Director of Workforce and OD; of particular note being the revision of the wording on page 33 of the policy surrounding the driving license.

**RESOLVED: That the policy, subject to the changes as discussed being implemented be recommended for approval by Trust Board.**

**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)**