



**MINUTES OF THE OPEN MEETING OF THE WELSH AMBULANCE SERVICES NHS TRUST BOARD, HELD ON THURSDAY 4 JUNE 2015, IN HEADQUARTERS, ST ASAPH AND VIA VIDEOCONFERENCING LINK TO VANTAGE POINT HOUSE, CWMBRAN**

**BOARD MEMBERS**

**PRESENT:**

Mick Giannasi	Chairman of the Board
Tracy Myhill	Chief Executive
Emrys Davies	Non Executive Director
Kevin Davies	Non Executive Director (Via VC, VPH)
Pam Hall	Non Executive Director
Judith Hardisty	Director of Workforce and Organisational Development
John Morgan	Non Executive Director
James Mycroft	Non Executive Director
Patsy Roseblade	Director of Finance and ICT
David Scott	Non Executive Director
Martin Woodford	Non Executive Director and Vice Chair

**TRUST BOARD**

**REPRESENTATIVES:**

Nigel Heal	Staff Side Representative
Melfyn Hughes	Welsh Language Officer
Lois Hough	Senior Communications Officer
Andrew Jenkins	Deputy Director Medical and Clinical Services
Jonathan Jones	Assistant Corporate Secretary (Chief Executive's Office)
Steve Owen	Corporate Governance Officer
Bleddyn Roberts	Staff Side Representative
Gordon Roberts	Interim Assistant Director of Operations (EMS)
Dawn Sharp	Corporate Secretary
Nick Smith	Interim Assistant Director of Operations (PCS)
Jonathan Watts	Associate Portfolio and Programme Director
Julie Winspear	Head of Concerns and Business Management

**APOLOGIES**

Mike Collins	Director of Operations
Mike Coupe	Director of Strategy, Planning and Performance
Sara Jones	Director of Quality and Nursing
Brendan Lloyd	Medical Director

**34/15 CHAIRMAN WELCOME AND UPDATE**

The Chairman welcomed everyone to the meeting including Mr Nick Smith to his first Board meeting. He reminded members that the meeting was an additional meeting in the schedule intended primarily to discharge the Board's responsibility to sign off the end of year accounts. For that reason, some of the standing items (e.g the patient story, the Chair

and Chief Executive updates, etc.) which normally appeared on the agenda had been excluded and the level of discussion around others (e.g the performance report) would be constrained. However, there were a number of additional matters which had been included on the agenda as a matter of expediency.

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

### **35/15 PROCEDURAL MATTERS**

**RESOLVED: That the standing declaration of Mr Emrys Davies as a retired member of UNITE be noted.**

### **36/15 MINUTES OF COMMITTEES**

Members were informed by the Chairman that this item would be deferred to the next Board meeting in July 2015 given that this was an additional meeting in the schedule and some of the minutes being presented had not been approved. The Chairman suggested that in future, unless Minutes of Committees had been approved by the relevant Committee they should not be presented to the Board for endorsement.

**RESOLVED: That this item be deferred and in future, only Minutes that had been approved by the relevant Committee be presented at Trust Board.**

### **37/15 WELSH LANGUAGE ANNUAL REPORT**

In presenting the report, the Corporate Secretary advised the Board of the requirements for submission of the report to the Welsh Commissioner by 5 June 2015. Following changes agreed to the routing of Welsh Language business at the Chairs' Working Group on 7 May, the report had been presented to the QuEST Committee on 14 May who had agreed to delegate authority to the Committee Chair to approve the report for submission to the Board.

Members held a lengthy discussion in which they considered various options to improve the current position going forward in terms of Welsh speakers within the Trust focusing on recruitment. The Executive Management Team were asked to consider the Welsh Language Commissioner's response, and once received, together with recommendations for improving the recruitment of Welsh speakers in the Trust, would then be submitted to QuEST.

Reference was made to Welsh language considerations being taken into account as part of the roster review framework. It was agreed that further clarification was needed as to how this was being addressed and the validity of the statement. The report had the support of the Trust's Welsh language Implementation Group who had approved the content of the report.

**RESOLVED: That**

- (1) the report be approved for submission to the Welsh Language Commissioner;**
- (2) following the response from the Welsh language Commissioner, the Executive Management Team consider an action plan to progress and promote the Welsh Language within the Trust and this be referred to QuEST for consideration and ongoing monitoring; and**
- (3) the Corporate Secretary respond to the query regarding the roster review**

**framework and Welsh language considerations and report back as part of the action log update.**

### **38/15 INTEGRATED PERFORMANCE REPORT**

The Chief Executive outlined the ongoing work of the Head of Planning and Performance in developing a revised Integrated Performance Report going forward. It was noted that the Finance and Resources Committee (FRC), at its next meeting, would have the opportunity to consider and review in more depth the report in its redrafted state.

The Chief Executive reported that performance had been improving steadily month on month which had been particularly pleasing. Of particular note had been the overall improvements not only in terms of performance but also a noticeable decrease in sickness levels amongst staff within the Cwm Taf Explorer Project.

The Chairman welcomed comments from Members. The following points were raised:

- The report illustrated a huge variance in the handover to clear performance statistics which was due to the very low numbers being reported.
- There was still a requirement to provide metrics that were simpler and more meaningful.
- The positive effect on overall performance by the involvement of Community First Responders (CFR) should be included within the report.
- The Board considered the recruitment programme and were assured by the Director of Workforce and OD that whilst there would always be turnover resulting in vacancies, an active ongoing recruitment drive was in place.
- The Deputy Director of Medical and Clinical Services reminded the Board of the function of the Organisational Learning Group (OLG) which was to scrutinise, monitor and advise of any lessons learned in terms of Serious Adverse Incidents and Adverse Incidents. It was acknowledged that the OLG would be reporting on a regular basis in future to the QuEST Committee regarding lessons learnt.

#### **RESOLVED: That**

- (1) the Integrated Performance Report be noted;**
- (2) the comments as raised above, where applicable, be incorporated within the report; and**
- (3) the Deputy Director of Medical and Clinical Services ensure that organisational learning from OLG is reported to the QuEST Committee after each meeting of the group.**

### **39/15 FINANCE REPORT – MONTH 1 2015/16**

The Director of Finance and ICT presented the financial position as at the end of month one. In presenting the report the Director added that the reported outturn performance for the year to date period based on the Trust's Month one accounts was a retained deficit of £0.438m.

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

- There had been a reduction in the cost of operational sickness for the same period last year.
- The Trust continued to fund initiatives such as double time and overtime in its continuing effort to improve performance.

### **Savings plans**

In terms of the savings plans the Director of Finance and ICT assured Members that the plans had been risked assessed at a high level and would be further scrutinised by the Executive Management Team prior to being presented to the FRC. Members were further assured that summary monitoring of savings plans would continue at Board level.

Martin Woodford Non Executive Director and Chairman of the FRC commented that the Board required assurance that the schemes within the plan were robust and the FRC needed to be provided with sufficient detail, on a scheme by scheme basis, how the plans would be delivered.

Members debated the savings plans in greater detail and raised the following points and concerns:

- In conjunction with the savings plans there was a requirement to provide supplementary tracking against any actions being taken.
- A graphical snapshot/glide path which illustrated the overall savings plan and a plot which demonstrated the savings as they were due and whether they were being achieved would be constructive and of value.
- Concern was expressed that the Trust still did not have a proper financial plan in place for the year - The Director of Finance and ICT provided assurance that by the next Board meeting an effective plan would be in place.
- The Trust should consider alternative methods to improve performance other than the use of private providers and double time/overtime.

The Chairman commented there was still further detailed work required, the timescales for which were limited, and it was essential that the Trust was very clear in how it was going to monitor savings and how the savings plans were to be illustrated. At the July meeting, the Board must be given clear and concise assurance in terms of a savings plan going forward. The Trust must not go beyond June continuing to spend money on overtime etc without clear agreement from EASC about the future funding. There needed to be an alternative plan to reach financial balance should the Trust not be given an explicit agreement to continue with its current spending. The work to find alternative methods, other than the current arrangements in place, to improve performance in a sustainable way needed to be conducted as soon as possible.

The Chief Executive commented that the Trust needed to be clear what actions and measures it was going to take in order to secure funding going forward. Furthermore the Chief Executive advised Members that a series of high level meetings were due to be held which would involve discussion on the underpinning work, how the Trust could secure its funding and what the exit strategies would be for some of the savings schemes.

The Board also discussed the timelines around the agreement of the 2016/17 and 2017/18 financial plans and the need to allow sufficient time for strategic discussion, including an assessment of how staff ideas are incorporated to support the plans going forward.

## **Capital**

The Director of Finance and ICT provided Members with a brief overview on the approval and expenditure process in terms of discretionary capital and responded to a query in terms of the digital pens expenditure and advised that clarification in that regard would be provided to Pam Hall, Non Executive Director after the meeting.

The Board were advised by the Director of Finance and ICT that the Business Justification Case (BJC) for vehicles it had submitted (just over £13m) was deemed unaffordable by Welsh Government (WG). WG had asked the Trust to reduce the figure by approximately 50% and wanted to understand the implications involved should this decision be taken. At this stage, nothing had been agreed, nevertheless the effects and the risks were being mapped out, one being that vehicles would be extended to a nine year cycle.

The Board discussed the pilot scheme relating to the hand held devices which were being allocated to Community First Responders. The Board needed to be clear in terms of the roll out of the hand held devices and it was agreed that further discussion in this regard be conducted in the Closed session of the Board to determine clarity going forward.

Concern was expressed by Staff Side in terms of working in vehicles which were nine years old from both staff and patients perspectives. The Director of Finance and ICT was aware of the significant impact and advised that risk assessments would be conducted and informed the Board that a meeting with the Commissioner had been scheduled to discuss the issue. The Director of Finance and ICT agreed to keep the Board informed of any ongoing progress.

### **RESOLVED: That**

- (1) the financial position as reported for Month one, the associated key risks, issues and limitations given it was Month one, be noted; and**
- (2) the savings plans required further work and improvement to the savings profiles which would be monitored through the FRC;**
- (3) urgent proactive work was required in order to provide assurance to the Board in terms of how it was going to address its current funding/spending position and this be considered by FRC with a report back to the July Board;**
- (4) clarity was required to determine the plan going forward in terms of the roll out of the hand held devices for the Community First responders;**
- (5) a further report be provided by the Director of Finance and ICT on any progress in terms of the situation regarding the Vehicle BJC; and**
- (6) the Director of Finance and ICT consider the timelines for the production of the 2016-18 financial plans including taking account of staff suggestions regarding future savings.**

## **40/15 THE REFRESHED INTEGRATED MEDIUM TERM PLAN**

The Chief Executive presented the Board with a brief explanation in terms of why the plan required a refresh, the work required to demonstrate that and the process in terms of how it

was going to be delivered. The Chief Executive introduced Jonathan Watts, Associate Portfolio Programme Director who provided further details of the plan for the Board's attention.

The Associate Portfolio Programme Director outlined the plan and drew the Board's attention to the eight key priorities for the Trust going forward in 2015/16 which now reflected some points of clarity that had been gleaned from both internal and external stakeholders:

- Developing a **community engagement strategy** and implementation plan to enable us to interact with all relevant stakeholders and promote community ownership of the service
- Agreeing, embedding and sustaining new **clinical models** in EMS, NEPTS and the transition from NHSDW; establishing the role of the Trust as a healthcare provider and clinical service rather than simply a transport service
- Developing plans that **localise the delivery of the IMTP** (LDPs) minimising demand on the Ambulance service, promoting choice for patients and improving the quality of patient outcome
- Developing and implementing a **Quality Improvement Plan** that promotes better service user/patient experience and outcomes and forms the backbone of the transformation agenda
- Developing an **integrated service, workforce and financial planning framework**, delivering a balanced financial and workforce plan for 2015/16 that ensures safe and affordable establishments and demonstrates value for money and secures ongoing financial stability
- Developing a robust **performance management framework** that demonstrates accountability and transparency, meets the needs of the Trust and Commissioners and is timely and sufficiently detailed for a range of stakeholders within and outside the Trust
- Developing a **workforce, OD and improvement transformation programme** that is aligned to delivering the IMTP, and enables the Trust to achieve its aspiration to become a high performing organisation
- Strengthening the **infrastructure** required to support delivery e.g. governance framework, estates strategy, health informatics

In terms of in-year milestones and due to the dynamic environment in which the Trust conducts its business, some of these would inevitably shift, however the Trust would always be in a position to provide clear justification for that movement.

The Associate Portfolio Programme Director referred the Board to the interim benefits realisation update and confirmed that it would, in future iterations, feature as an appendix to the plan.

Members were informed that the Trust's intranet site would provide staff with the opportunity to glean information in terms of progress with the IMTP and also that an IMTP implementation group had been established to facilitate further development in delivering progress.

The Chairman thanked the Associate Portfolio Programme Director for the clear, succinct and very helpful report which had addressed the issues from the report presented at the previous meeting in a meaningful and progressive way. He added that this had been a good example of a paper which the Trust should learn from.

Members acknowledged the vast amount and complex nature of the work and welcomed the Plans on a Page document which had covered most of the elements that would, ordinarily be expected to be illustrated in any event.

Members raised a series of questions which were responded to by The Associate Portfolio Programme Director as follows:

- In terms of the benefits and measures for success, these had originally been written by a wide cross section of the workforce. The next IMTP scheduled implementation workshop would be dedicated to a benefits management exercise which was designed to refine the true meaningful benefits.
- In terms of the CAD replacement being out of scope further work would be conducted to clarify the current position.
- With regard to risk in terms of the release of staff to contribute to projects and how this was being managed. Management were aware of this issue and were working to mitigate the risk against carrying the projects forward.
- Absolute clarity was required in terms of whether the development of the alternative pathways was in scope – it was agreed that at the next iteration of the report clarity would be provided.

The Chief Executive reiterated the enormous challenge contained within the IMTP and commented that progression would be demonstrated on an iterative basis.

The Chairman stated it was generally recognised by WG and the Chief Executive of the NHS that the Trust was under resourced in terms of its central infrastructure that it needed to operate effectively.

Further work in terms of the concerns expressed by the Commissioner with regard to the Finance Section of the plan was required and it was agreed that this be conducted by the Director of Finance and ICT prior to the next Board meeting. In light of these concerns voiced by the Commissioner, the Board was not in a position to approve the plan.

**RESOLVED: That**

- (1) the progress made in refining the refreshed IMTP since the last Board meeting and the actions taken to address points of clarification raised be noted;**
- (2) the Director of Finance and ICT conduct further work with regard to the Finance Section of the plan;**
- (3) the next report provide clarity in terms of whether the development of alternative pathways was in scope; and**
- (4) a note of thanks be recorded to Jon Watts and his team for their efforts in the production of an excellent report.**

#### **41/15 APPROVAL OF THE 2014/15 ANNUAL ACCOUNTS, GOVERNANCE STATEMENT and INTERNAL AUDIT OPINION**

The Director of Finance and ICT presented the reports which had been reviewed and scrutinised at Audit Committee and were being submitted to the Board for approval.

In terms of the Annual Governance Statement the Director of Finance and ICT drew the Board's attention to certain items referred to in the Corporate Risk Register.

Furthermore, she informed the Board that the Trust's own self assessments against the Health Care standards had worsened which was due to a recent scrutiny panel commenting that the Trust had judged itself more robustly this time than in previous years. With regard to the limited assurance given by the Head of Internal Audit, the Director of Finance and ICT explained the underlying principles behind his decision.

David Scott, Non Executive Director and Chairman of Audit Committee confirmed that the accounts had been reviewed by Audit and were of an excellent standard.

**RESOLVED: That the 2014/15 Annual Accounts, Governance Statement and Internal Audit Opinion be approved.**

#### **42/15 AUDIT OF FINANCIAL STATEMENT REPORT**

The Director of Finance and ICT presented the Board with the report which had been received from the Trust's external auditors, KPMG, detailing key matters arising from their audit work on the 2014/15 financial statements, and submitting letters of representation sought as standard audit practice by the Wales Audit Office (WAO) and KPMG.

**RESOLVED: That the financial statement report be received and as part of the approval of the annual accounts for 2014/15, the Letters of Representation be signed.**

#### **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](http://www.ambulance.wales.nhs.uk)