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WELSH AMBULANCE SERVICES UNIVERSITY NHS TRUST

CONFIRMED MINUTES OF THE OPEN MEETING OF THE ACADEMIC PARTNERSHIP COMMITTEE OF THE WELSH AMBULANCE SERVICES UNIVERSITY NHS TRUST HELD ON FRIDAY 19 JULY 2024 VIA TEAMS Chair: Hannah Rowan

MEMBERS:

Hannah Rowan	Non-Executive Director and Committee Chair
Kevin Davies	Non-Executive Director

IN ATTENDANCE:

Julie Boalch	Head of Risk/Deputy Board Secretary
Estelle Hitchon	Director of Partnerships and Engagement
James Houston	Head of Strategy Development
Caroline Jones	Corporate Governance Officer
Jo Kelso	Head of Workforce Education & Development
Alex Payne	Corporate Governance Manager
Keith Rogers	Trade Union Representative
Andy Swinburn	Executive Director of Paramedicine
Jonathan Turnbull-Ross	Deputy Director of Remote Clinical Care

APOLOGIES:

Angela Lewis	Director of People and Culture
Mark Marsden	Trade Union Representative
Trish Mills	Director of Corporate Governance/Board Secretary
Nigel Rees	Assistant Director of Research and Innovation
Duncan Robertson	Assistant Director for Clinical Development
Jonny Sammut	Director of Digital Services

38/24 WELCOME AND INTRODUCTION

Hannah Rowan welcomed everyone to the meeting bilingually and confirmed quorum. She went on to explain that due to a worldwide IT issue, Jonny Sammut was unable to join the meeting today.

Hannah Rowan asked members if they had any other items of business they would like to raise later in order for timings to be adjusted appropriately; and confirmed she would give a brief update regarding her Research Champion activity.

39/24 DECLARATIONS OF INTEREST

There were no additional declarations to those already recorded on the register.

RESOLVED:

There were no additional declarations raised to those recorded on the register.

40/24 MINUTES OF THE LAST MEETING

The minutes of the meeting held on 16 January which had been reviewed and amended following comments from Nigel Rees, were approved as a correct record.

Hannah Rowan had a question on the minutes of 23 April 2024 relating to "there being no ongoing discussions relating to funding capability and capacity within the research and innovation space".

Andy Swinburn confirmed that the conversation was prompted by the various ongoing research activities, with Nigel Rees being central to these efforts. The main points highlighted by Andy Swinburn were:

1. **Integration into Daily Work:** Research should become a routine part of everyone's work, incorporated into work plans rather than seen as an additional task.
2. **Building Core Capacity:** There is a need to develop core capacity, which is currently active. The job description relating to this, is in development. There is an ongoing issue with job banding capacity, particularly concerning the deputy role for Nigel Rees.
3. **Current Active Pieces:** The team is actively working on job evaluation and the deputy role for Nigel.
4. **Future Planning:** Nigel has been asked to prepare a plan that can be quickly implemented if additional funding becomes available. Currently, only 0.4 FTE of a position is funded by the Trust, but the goal is to increase this to 1.4 FTE. This plan should be ready by the end of Q3/Q4 to address capacity issues and support future growth in research.

Additionally, there is an emphasis on integrating research into everyone's work plans, making it a routine part of departmental business. The follow-up discussion in October will address these points further. It was therefore not necessary to adjust the minutes.

Estelle Hitchon added that the conversation focused on the different types of research and the need to make research more accessible ensuring everyone could participate, regardless of the scale of their involvement. Estelle made the following points:

1. **Nigel's Role:** Nigel has been successful in securing research contracts and acting as the Principal Investigator (PI) for structured, approved research projects.
2. **Accessibility of Research:** There is a concern that highly academic and structured research could be intimidating. It is important to break down barriers and encourage participation in smaller, more accessible research initiatives.
3. **Integration and Capacity:** Emphasising the need to integrate research into everyday work and address capacity issues. The current 0.4 FTE commitment is insufficient, and there is a need to plan for potential future funding to increase this capacity.
4. **Distinction in Research Levels:** There should be a clear distinction between more accessible, lower-level research and highly academic research, and a strategy to bridge the gap between the two.

Jonathan Turnbull-Ross added that the organisation relied on the efforts of its people rather than additional funding to drive projects. Jonathan made the following points which emphasised the importance of strategic investment and support to foster innovation and achieve excellence:

1. **Initial Energy and Testing:** There is enthusiasm for starting projects and testing ideas, but integrating these into the operational and strategic framework is challenging.
2. **Budget Constraints:** Many projects had been run without a budget, leading to a "make do and mend" mentality. This approach is not sustainable for long-term success.
3. **Strategic Focus:** The need to decide whether to continue or end projects was crucial. The organisation must pick areas of excellence to focus on, aligning with the goals of achieving UTS.
4. **Support for Innovation:** More backing is needed for innovation and change, highlighting the efforts of key individuals like Andy and Nigel.

Jo Kelso also expressed the importance of education in fostering a curious mindset and integrating research into organisational practices. Jo made the following points:

1. **Educational Systems:** Current systems encourage research primarily for achieving qualifications. There is a need to shift towards fostering a curious mindset that benefits both the individual and the organisation.
2. **Encouraging Inquisitiveness:** Recognising and encouraging lower-level learning and inquisitiveness is crucial. This should go beyond achieving qualifications to feeding ideas back into the organisation.
3. **Structuring Research Efforts:** There is a need to structure research activities across the organisation to ensure clarity and coordination. This includes directing colleagues to central figures like Nigel to consolidate ideas.
4. **Quantifying and Justifying Investment:** To justify increased investment in research, it is essential to quantify current activities and demonstrate their value. This would help in making a case for sustainable growth and support.

Hannah concluded by saying there is a need to balance and support both practical and formal research efforts to foster innovation and growth.

RESOLVED: That the

- 1) minutes from the meeting on the 16 January 2024 were approved; and**
- 2) following a detailed discussion the minutes from the meeting on the 23 April 2024 were approved.**

41/24 ACTION LOG AND MATTERS ARISING

The Action log was discussed with no actions due today, following the discussion relating to the frequency of reporting on the Research Governance Framework and the amendment of that due date.

Hannah Rowan queried if there had been any update on the appointment of an Academic Non-Executive Director following the alert raised in the previous Highlight Report. It was confirmed that the Minister was considering three candidates.

RESOLVED: That the

- 1) action log was reviewed and updated as set out above; and**
- 2) Committee noted that the Minister was considering the candidates suitable for the appointment of an Academic Non Executive Director.**

42/24 UNIVERSITY TRUST STATUS BENEFITS REALISATION

Estelle Hitchon set out, for context, that the process for University Trust Status (UTS) began almost three years ago, with formal accreditation received earlier this year. She gave a short presentation and asked members to discuss what three things would UTS deliver, which could be easily communicated and used to drive the Integrated Medium-Term Plan (IMTP) forward. She set out that the focus was on leveraging the newly acquired UTS.

- 1. Benefits and Strategic Use:** The discussion aimed to identify the genuine benefits of UTS and how to leverage it for strategic goals and making it meaningful for people.
- 2. Integration with Other Initiatives:** Consideration of how UTS aligned with other initiatives, such as the Well-being of Future Generations Act, to galvanise efforts and motivate the organisation.

The discussion emphasised the need for a clear, strategic approach to utilising UTS to enhance organisational planning and development.

Members discussed the benefits and simplifying the goals for UTS and identifying best-case scenarios. The discussion highlighted the importance of a structured, evidence-based approach to achieving excellence and fostering a culture of continuous improvement. Key points included:

- 3. Simplification and Focus:** The aim was to narrow down broad ideas into simple, clear goals.
- 4. Best-Case Scenarios:** Participants were encouraged to think about their ideal outcomes for UTS and share keywords in the chat. For example, "credibility" was mentioned as a key ambition.

5. **Collective Input:** The process involved gathering initial thoughts from everyone to get an overview of starting points and aspirations.
The discussion emphasised the importance of starting broad and then refining ideas to create focused, achievable goals for leveraging UTS.
6. **Consultant Clinical Practice:** Linking UTS to consultant clinical practice to promote clinical excellence and professional growth within the ambulance service.
7. **Centre of Excellence:** Establishing a centre of excellence, particularly in remote clinical care, to position the organisation as a leader in this field. This included building the necessary faculty, team, and infrastructure.
8. **Point of Care Delivery:** Enhancing point of care delivery, including innovative solutions like drones for rapid testing, to connect clinicians with patients and necessary information efficiently.
9. **Credibility and Value:** Increasing the organisation's credibility and perceived value by demonstrating excellence and innovation in clinical practice and care delivery.
The discussion emphasised the need for strategic focus and investment to fully leverage UTS and achieve these goals.
10. **Holistic Approach:** The need for both clinical and organisational excellence, recognising that one supports the other.
11. **Quality and Governance:** Establishing clear structures, governance, and norms to define and achieve quality across various parts of the organisation.
12. **Evidence-Based Development:** Encouraging curiosity and evidence-based practices to continuously improve and develop.
13. **Professionalism Across Roles:** Promoting professionalism in all roles, not just clinical ones, and expecting staff to work to the top of their scope.
14. **Quality Assurance:** Shifting from a quality control mindset to a quality assurance approach, ensuring systems and practices are in place to do things right from the start.

The conversation then touched on the challenges of prioritising impactful projects over new, attractive innovations, including:

15. **Attraction to New Innovations:** The organisation often gravitated towards new innovations, but there is a need to focus on fundamental practices.
16. **Evidence-Based Practice:** Many current practices, such as those in the JRCALC clinical guidelines, lacked a strong evidence base. There is a need to prioritise research that challenged and validated these long-standing practices.
17. **Historical Practices:** Examples like fluid administration, oxygen therapy, and spinal immobilisation were highlighted as areas where past practices needed re-evaluation based on current evidence.
18. **Ethical Considerations:** Challenging established practices involves ethical considerations and requires rigorous research to ensure patient safety and efficacy.
The discussion emphasised the importance of grounding clinical practices in solid evidence before pursuing new innovations.
19. **Vulnerability in Research:** Conducting research that may not yield expected results required openness and could be challenging to sell to the wider system.
20. **Fundamental Challenges:** There is a need to question and validate long-standing practices, such as response times, to ensure they were evidence-based and truly beneficial.

21. **Resource Allocation:** Evaluating whether resources were being used effectively, especially in areas like response times, which may not have a proven impact on patient outcomes.

Members recognised the importance of evidence-based decision-making and the need to challenge established practices to ensure they were truly effective. Managing change in a fast-paced digital age was also raised noting that digitally enabling the right thing would be important. The following points were discussed:

22. **Structured Change Management:** Emphasising the need for a structured approach to change, ensuring assumptions were tested and changes were implemented rigorously.
23. **Pace of Digital Change:** Acknowledging the rapid pace of digital advancements and the influx of new technologies, such as web apps for vital signs monitoring.
24. **Leadership and Resources:** Highlighting the importance of having adequate leadership and resources, particularly questioning if the current 0.4 commitment for the Assistant Director of Research was sufficient to manage these changes effectively.
25. **Core Message:** Ensuring the organisation is well-prepared and supported to implement changes quickly and efficiently, maintaining the necessary rigor. The discussion underscored the importance of balancing speed with structure in managing digital and organisational changes.

The conversation continued with discussion around evaluating the effectiveness of current practices and the role of digital advances. Key points included:

26. **Effectiveness of Practices:** Questioning whether current practices, such as “hear and treat,” actually solved problems or if patients ended up seeking further care elsewhere.
27. **Connecting Data:** Emphasising the importance of connecting data to track patient journeys and outcomes, leveraging digital advances to achieve this.
28. **Desirable Outcomes:** The goal is to use digital tools to track and improve patient care outcomes effectively.
29. **Open Discussion:** The discussion highlighted the need for data-driven evaluation of practices and the potential of digital tools to enhance patient care tracking and outcomes.

The organisation is generating many ideas and there is enthusiasm for innovation and Estelle Hitchon suggested the importance of common purpose and inclusivity within the organisation was necessary. Some points discussed included:

32. **Decision-Making on Innovations:** It is important to make the right decisions on which innovations would add the most value and impact.
30. **Maturing Processes:** The organisation had started to mature its processes by testing ideas through small tests of change rather than full implementation.
31. **Evaluation and Decision-Making:** There is a need to strengthen the rigor around evaluation and decision-making based on these tests.
32. **Prioritisation:** It is critical to prioritise which innovations to support, as trying to take too many forward could hinder objective and detailed evaluation.
33. **Continuous Improvement:** While there were positives, there were also areas for improvement and maturation in the organisation’s approach to innovation.

34. **Common Purpose:** UTS is for everyone in the organisation, not just clinical staff. It is important to ensure that all contributions were valued and understood.
35. **Research and Evaluation:** There is a commitment to evaluating new models and initiatives to ensure they are safe, effective, and supported by evidence. This included having external academic reviews.
36. **Professionalism and Credibility:** The organisation aimed to be seen as professional and credible, redefining what it means to be an ambulance service. This involved sound arguments, evidence, and professionalism across all roles.
37. **Universalism:** Emphasising that the organisation's goals and benefits applied to all staff, reinforcing the idea that everyone's role is important in delivering clinical care.

Hannah Rowan addressed the practical use and impact of achieving UTS.

38. **Utilising University Trust Status:** The organisation needed to determine how to use UTS effectively to drive improvements.
39. **Framing and Communication:** It is important to frame the benefits and communicate them effectively within the organisation and to external stakeholders.
40. **Internal Understanding and Goals:** The focus should be on understanding what the organisation wants to achieve with the status and how it would be effective.
41. **Support and Resources:** There is a need for clarity on the next steps, including involving the wider Board and securing necessary support and resources.
42. **Leadership and Team:** Estelle is leading the initiative, but there is a need for a fuller team to support the work and maintain momentum.

43. **IMTP Reporting:** Including progress and benefits of UTS in the IMTP for 2025 onwards, with a draft ready by quarter three for Board submission in quarter four.
44. **Collaborative Effort:** Involving a smaller group to refine the position paper, test it with Executives, and align it with the overall strategy.
45. **Next Steps:** Reviewing the draft in the next meeting (in October) to ensure it captures the discussion accurately and maps out the connections between ongoing and planned work.
46. **Board and IMTP Integration:** Presenting the refined position paper to the Board alongside the IMTP to meet monitoring requirements and articulate the strategic benefits of UTS.
47. **Board Development Session:** The aim is to take recommendations to a Board Development session, outlining the potential impact and structure of UTS.
48. **Areas of Focus:** The Committee would identify key areas for success and the necessary resources (people, time, money) to achieve these goals.
49. **Prioritisation:** The wider Board would discuss and agree on the order of priorities for the initiatives.
50. **Timeline:** The position paper would be prepared by September, reviewed in the Committee meeting in early October, and then presented in a Board Development session.
51. **Integration with IMTP:** The outcomes will be integrated into the IMTP, ensuring alignment with strategic plan.

An annex to fully describe the above discussion and the attribution of comments is appended to the minutes.

The Committee agreed for Estelle Hitchon to provide a position paper to capture the essence of the discussion, to the next meeting, to ensure commonality without trying to cover everything detailed above.

RESOLVED: That

- 1) the Committee had a full discussion on the benefits realisation which is fully set out in the annex; and**
- 2) a position paper will be brought to the next meeting.**

43/24 COMMITTEE PRIORITIES AND CYCLE MONITORING REPORT

Hannah Rowan asked that the Committee priorities set out be re-considered and suggested that the clarity on the purpose and focus of the Committee was its own priority, together with the UTS benefits realisation. She also referenced the need to focus on the Research Governance Framework (RGF), and whilst it was an area of interest last year it could still be a priority this year. Additionally, she questioned whether risk reporting should be a dedicated priority.

Julie Boalch advised that should Hannah, as Chair of the Committee, wish to review the priorities they can be reviewed and re-presented to the Committee for endorsement. Julie agreed with the view that UTS benefits realisation should be a Committee Priority and noted that the RGF was now included within the Committee Cycle of Business, so it may not be necessary for the Committee to retain this as a priority.

With respect to the risk reporting, Julie Boalch stated that whilst there might not be any risks currently attributable to this Committee, it was possible that relevant risks may emerge in the coming months and would be developed and reported, as appropriate. Julie added that the relevant risk reporting is captured on the Cycle of Business.

Following discussion, the Committee agreed that it was appropriate to remove the risk reporting as a Committee Priority; remove the review of the name of the Committee in-year as a Priority – having agreed that this was not a singular focus; to add the benefits realisation of UTS as a Priority, and to reconfirm the Priority regarding clarity of purpose and focus. The Priorities will be reconsidered and brought back to the Committee for endorsement.

RESOLVED: That the Committee priorities be reconsidered to reflect the UTS Benefits Realisation together with clarity on the purpose and focus of the Committee and brought back to the Committee for endorsement.

44/24 APPROVED COMMITTEE TERMS OF REFERENCE AND ANNUAL REPORT 2023/24

Hannah Rowan sought clarity on 1.4 of the Terms of Reference 'the Trust has made a commitment to recognise the importance of partnership working with a full range of academic partners and has established an academic partnership committee to facilitate and develop this work', as she did not consider this to be something that the Committee could demonstrate action towards. She referenced the reason that the Committee was established may not necessarily be the reason it continued to operate.

Julie Boalch confirmed that the Trust's Standing Orders set the expectation for partnership working within the organisation, with the Academic Partnership Committee fulfilling this role on behalf of the Board. This involves shaping work programmes and committee membership. Although the exact methods were not prescribed, the Committee was expected to oversee monitoring, oversight, and scrutiny. This would be integrated into the business cycle, focusing on achieving goals, reporting, and monitoring progress. Estelle Hitchon added that the new Academic Non-Executive Director would be critical in helping the Committee navigate its way forward.

RESOLVED: That the item was for reference and the comments were noted.

45/24 ANY OTHER BUSINESS

Hannah Rowan spoke about the recent Research Champions Group meeting; it was highlighted that new funding was forthcoming through the VPAG. The acronym VPAG stands for the Voluntary Scheme for Branded Medicines, Pricing, Access, and Growth. Hannah advised that the UK Government has approved a £400 million investment over five years to promote innovation, sustainability, and growth in the UK.

This funding would be allocated to three areas, with pioneering clinical trials being relevant to the Trust. Wales would receive £22.1 million over five years and this investment is intended to bolster the NHS's capacity for commercial clinical research and generate future income. The importance of keeping everyone informed about this development was emphasised.

RESOLVED: That the update from the recent Research Champions Group meeting was noted.

46/24 KEY MESSAGES FOR BOARD DECISIONS / ACTIONS

The Highlight report would be a high-level update to provide the Board with a verbal summary of the meeting for information.

47/24 DATE OF NEXT MEETING:

The date of the next Committee meeting is 07 October 2024.