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FINANCE AND PERFORMANCE COMMITTEE HIGHLIGHT REPORT TO BOARD

This report provides the Board with key escalation and discussion points at the last Committee meeting. A full list of items discussed appears at the end of the report to enable members to raise any questions to the Chair which have not been drawn out in the report. The papers for these meetings can be found by following this [link](#) to the Committee page on the Trust website.

Trust Board Meeting Date	29 January 2026
Committee Meeting Date	20 January 2026
Chair	Jayne Beeslee

KEY ESCALATION AND DISCUSSION POINTS

ALERT

(Alert the Board to areas of attention)

1. Development of the **2026-29 IMTP** is on track for submission to Welsh Government on 31 March 2026 with a number of further touchpoints for the board in February and March. The financial year 2026-27 is expected to be the most financially challenging for the Trust in many years, with a maximum 1.11% uplift already offset by unavoidable pressures, including employers National Insurance and Welsh Risk Pool contributions. Further challenges include non-pay inflation, digital contract costs, cost pressures, and substantial savings targets requiring difficult investment and disinvestment decisions. A closed board session is scheduled for 29 January 2026 to address these issues. Members were assured on the transparent view and the executive team's methodical approach to preparation of the IMTP and budget for final approval at Board, notwithstanding the magnitude of the challenge ahead.

ADVISE

(Detail any areas of on-going monitoring, approvals, or new developments to be communicated)

2. December's Board Development received a presentation on options for the **revised Monthly Integrated Quality and Performance Report (MIQPR)**, based on feedback received from NEDs and Executives. The following actions were agreed and are being progressed:
 - review of current set of KPIs against the Trust's strategic objectives, with a view to reducing the number of KPIs
 - disaggregate the MQIPR into committee specific KPIs but retain the overall scorecard for each committee in order to avoid silo working
 - report by exception where KPIs are off target and for KPIs that are on target, graphs will be provided in an appendix with no supporting narrative
 - retain the balanced scorecard as a way of achieving strategic alignment in a quantitative form
 - seek to add a more predictive element to the reporting



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- remove use of upward/downward trend as a target and replace with agreed benchmarks/targets
- with respect to greater use of SPC the Trust's analysts will have the discretion to determine the best way of visualising the data

These changes will take place over a number of months, with full go live in Q1, once the 2026-29 IMTP has been agreed.

3. Members **reflected** that the meeting felt more like a virtual Teams meeting than hybrid, with most participants joining remotely and only a few attending in person. It was suggested that if a hybrid format is intended, greater in-person attendance would be helpful; although it was acknowledged there are reasons for the current attendance pattern.

ASSURE

(Detail here assurance items the Committee receives)

The following items will also be presented to board at their next meeting however members may benefit from the following points of discussion from the committee:

4. With respect to the **financial position for months 8 and 9 2025/26**. The month 8 position was noted, and the committee took assurance from the update. The Trust is reporting a revenue year to date deficit of £66,000 and a small in month surplus of £69,000 for month 8 2025/26. In line with the balanced financial plan approved as part of the 2025-28 IMTP the Trust is forecasting to breakeven by the year-end. Gross savings of £5.800m have been achieved in month 8 against a target of £5.621m. The committee heard that for month 9 financial position shows a year-to-date revenue underspend of £180,000 and a monthly surplus of £246,000.
5. Welsh Government's decision to fund the increase in the Welsh Risk Pool forecast improved the Trust's reported position and enabled acceleration of some expenditure that would otherwise have impacted next year. The Trust continues to forecast a break-even year-end, with the capital plan progressing well against a £32 million budget. Gross savings achieved are £6.492 million, exceeding the £6.362 million target, and payment performance remains strong at 98.4%. Members commended the strong financial management demonstrated by the Trust.
6. With respect to the **MIQPR for November/December 2025** with members discussing 111 call abandonment rates and noting that the KPI requires 95% of 111 calls to be answered within 60 seconds which is not realistic given performance has been below that level for some time. Members were assured that proposals have been made to commissioners to shift to a median and 90th percentile measure, aligned with other performance frameworks and noted that the target is not achievable as modelling indicated that the service is 22 FTE short of what would be required to reach target, even before demand peaks.
7. The committee received the **Integrated Medium Term Plan (IMTP) Q3 Assurance Report** and noted that the plan for 2025/26 was ambitious, with strong delivery evident, particularly in relation to the Clinical Model Transformation programme. Members also recognised that delivering at this pace and scale has required sustained effort, dedication, and resilience from staff, and expressed their thanks and appreciation for this commitment. Committee asked what strategic ambitions were most



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at risk of not being delivered. The AD Commissioning & Performance agreed to take this question away and obtain an answer in time for Trust Board.

The following items were only presented to this committee, and assurance is provided to the board as follows:

Operations Directorate Q3 Update

8. The Committee heard of the Covid Module 1 associated attendance at the Senedd's Public Accounts and Public Administration Committee in December 2025. The Committee thanked the Executive Director of Operations for his attendance, who shared that preparation was essential to provide meaningful responses to the questions posed.
9. With respect to WAST's participation in Exercise Pegasus the committee heard of the repeated challenges associated with attending multiple LRFs simultaneously and that it was felt there was not sufficient internal exercising of the plan. The intention is to strengthen internal exercising ahead of next winter.
10. The first operational deployment of the HART drone provided further assurance of innovation value, particularly through enhanced multi agency data sharing.
11. Members commended the continued work to modernise clinical safety communications, following national media scrutiny. The introduction of clinician led text messaging to patients has reduced uncertainty and duplicate 999 calls, with further enhancements in development. Early outcomes from the falls desk trial are promising, supporting future expansion.
12. Handover delays in December resulted in more than 13,000 lost hours, with some waits exceeding 24 hours. The NHS Wales directive to Health Boards to deliver the best in three month performance is unlikely to be met, and further guidance is awaited from the centre. The two week winter "reset" demonstrated system benefits through earlier discharges and higher transfer activity, informing future planning.
13. The committee also noted the October 111 digital outage, reinforcing the importance of a reliable digital front end, and received assurance that the implementation of the second phase of the ambulance performance framework had been clinically safe, with incidents linked to demand and capacity constraints rather than the model itself.

Non-Emergency Patient Transport Service (NEPTS) Capacity Management

14. The Quality, Patient Experience and Safety Committee (QUEST) asked this committee to take a deeper dive into the action underway to address persistent high demand for NEPTS, noting the resultant level of complaints relating to unmet patient need.
 - Within this context, the committee's discussion on NEPTS capacity confirmed that the service continues to operate within significant limitations, with demand regularly exceeding available and funded capacity. In 2025, NEPTS completed 552,602 journeys. 184,901 journeys were cancelled. 7.6% of total demand was cancelled by health boards. 5.1% was cancelled by service users themselves. CMP cancellations amounted to 3.9%.
 - Members noted the impact of reduced volunteer availability, longer journey distances, and



increasingly complex patient requirements, all of which contribute to cancellations, delays, and poor patient experience. These issues directly align with the concerns raised through PTR and the Quest action regarding unmet need and potential patient harm.

- The committee reviewed internal actions already underway, including roster optimisation, efficiency improvements, and closer monitoring of activity patterns. While these measures were recognised as necessary and appropriate, the committee emphasised that they will not fully bridge the gap between capacity and rising demand. As a result, the committee concluded that system level engagement, particularly with health boards and commissioners, remains essential. Ongoing discussions through the JCC were highlighted as key to exploring eligibility criteria, funding arrangements, and wider opportunities for service redesign.
- Non-Executive Director triangulation confirmed that these points align with their own experiences, providing further assurance that the constraints and risks are well understood and that the actions being taken are proportionate. In addressing the QUEST action directly, the committee confirmed that the organisation is taking reasonable and responsible steps to mitigate patient harm and improve the service. However, the committee acknowledged that, given current demand and capacity pressures, some level of poor patient experience is likely to continue.

15. The **Digital KPIs** relating to data and analytics, ICT systems, digital services, projects & programmes, and details on the progress against the Digital Plan were presented. Members noted that current vacancies in the digital team were directly linked to delivery challenges and lowlights in the KPI report, impacting pace and skill availability for key projects. Staff readiness and future workforce planning discussed, emphasising the need for digital roles to align with the People and Culture Plan, including human-centred design, adoption, and benefit realization, to ensure the digital strategy supports organizational goals. There were no issues of escalation to the board.

16. The **Information Governance (IG)** report issues of note included three key alerts. These concerned the missing DPIA for the Paxton ID system, which is now being addressed, strengthening of disaster recovery and business continuity arrangements, and a significant backlog in records management. Prioritisation and risk escalation are underway and there were no issues of escalation to the board. Other issues included:

- Reported data breaches have increased due to better visibility and reporting culture rather than more incidents.
- The IG toolkit submission remains on track, with only CCTV compliance outstanding.
- FOI performance is being affected by the complexity and volume of multi directorate requests. The team is reviewing processes, use of exemptions, and options to push back on requests that require creating new information, alongside considerations of capacity. The rising influence of AI on FOI activity was noted, including more complex and potentially litigation driven requests. Forthcoming regulatory changes, including the listening to people regulations, may help manage this.

The committee was invited to consider which digital and information governance KPIs it wishes to monitor to support effective escalation and strategic oversight, which it will do in the new financial year.



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Fire Safety

17. Assurance was taken from the annual fire safety update, which confirmed good compliance across the estate. Fire risk assessments are current for all sites, undertaken by an external provider, and all resulting actions are categorised and being progressed. The Trust is fully compliant with up to date EICR electrical testing certificates, and there has been a continued increase in trained fire marshals, with overall ESR fire safety compliance at 81.86%. Updates to the Fire Safety Policy are planned for submission through internal governance groups by January 2026, and Internal Audit has completed a review of fire safety which is scheduled for Finance and Performance Committee in March.
18. An alert was noted in relation to specific estate based actions, including the need to address emergency lighting flick tests in the south, with options currently under risk assessment. While weekly fire alarm testing is being completed at larger corporate sites, contact centres, and several ambulance stations, arrangements for nominated site leads to undertake testing across the remaining estate are still to be finalised.
19. Ambition was demonstrated through ongoing work to strengthen fire safety management, including ensuring that annual fire drills are completed at all sites and that consistent records are maintained. This forms part of a wider programme designed to improve assurance and standardise compliance across the estate.
20. Concerns were raised about previous non-compliance, with many sites lacking fire drills, and the need for more frequent reporting rather than just annual updates. It was agreed that exception reporting or interim updates would be considered to ensure ongoing committee assurance without overburdening resources, especially given the small size and low occupancy of many sites. There are no escalations to the board however the committee will have a six-month check-in on progress, and follow up on integration into broader infrastructure reporting, balancing risk and practicality.
21. Members received the **Decarbonisation update** and the ongoing delivery of the action plan. Future resourcing will need to be proportionate as new measures are introduced considering the challenging financial position and priorities for next year.
22. The **committee's annual priorities** are progressing well, and it was noted that the Waste Management update report was delayed from September and would be presented in March.

RISKS

The committee received the **Risk and Board Assurance Framework report** noting that **Risk 623** (Data Protection) has achieved its target score of 10 (2x5) reducing from (15 (3x5) and will be managed at a directorate level.

The new approach to **Risk 542** (Decarbonisation) and the disaggregation of internal and external factors continues and will be presented at a later meeting.

Financial risks were discussed throughout in the context of ongoing pressures, including the need to revisit **Risk 139** (financial sustainability). This is expected to increase in score given the challenging financial climate. Members acknowledged that the financial risks are significant and reiterated the pivotal



role the committee will play in navigating the future financial situation.

New risks are being considered in relation to the records management backlog and AI/FOI exemptions.

In private session, Members received assurance on the detail of **Risk 260** noting that there were no material changes during this period.

COMMITTEE AGENDA FOR MEETING

Operations Update for Q3	NEPTS Capacity Management	Financial position M8 and M9 2025/26
MIQPR	Digital reporting	Information governance report
IMTP Q3 assurance report and 26-29 development update including financial plan	Fire safety annual report	Environment, decarbonisation and sustainability update
Risk management and BAF	Committee cycle and priorities update	

COMMITTEE ATTENDANCE

Name	20 May 2025	21 Jul 2025	16 Sep 2025	18 Nov 2025 ¹	20 Jan 2026	17 Mar 2026
Jayne Beeslee (Chair)						
Bethan Evans					Colin Dennis	
Peter Curran			²			
Chris Turley			Ed Roberts	Ed Robers		
Rachel Marsh	Hugh Bennett	Hugh Bennett	Estelle Hitchon	Hugh Bennett	Hugh Bennett	
Lee Brooks				Judith Bryce		
Liam Williams	Wendy Herbert	Wendy Herbert				
Carl Kneeshaw						
Jonny Sammut			From 1022			
Trish Mills						
Hugh Parry				³		
Damon Turner						
Matt Dugdale						

	Attended
	Deputy attended
	Apologies received
	No longer member

¹ Emma Wood, Chief Executive Officer joined for this meeting.

² Peter Curran left the meeting at 10.25. Rhiannon Beaumon-Wood joined at 10.30 and was counted towards quorum.

³ Left for items 6 and 7