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Ymddiriedolaeth Brifysgol GIG
Gwasanaethau Ambiwylans Cymru
Welsh Ambulance Services
University NHS Trust

MINUTES OF THE MEETING OF THE FINANCE AND PERFORMANCE COMMITTEE (OPEN SESSION) HELD ON 16 JANUARY 2025 IN THE CARDIFF MAKE READY DEPOT AND VIA TEAMS

Meeting started at 09:30

PRESENT:

Jayne Beeslee Non-Executive Director and Chair
Peter Curran Non-Executive Director

IN ATTENDANCE:

Lee Brooks Executive Director of Operations
Penny Durrant Deputy Director of Nursing
Carl Kneeshaw Director of People
Osian Lloyd Head of Internal Audit
Rachel Marsh Executive Director of Strategy, Planning and Performance
Trish Mills Director of Corporate Governance/Board Secretary
Steve Owen Corporate Governance Officer
Hugh Parry Trade Union Partner
Alex Payne Corporate Governance Manager
Jonny Sammut Director of Digital Services
Chris Turley Executive Director of Finance and Corporate Resources
Damon Turner Trade Union Partner

APOLOGIES:

Julie Boalch Assistant Director of Corporate Governance and Risk
Bethan Evans Non-Executive Director
Liam Williams Executive Director of Quality and Nursing

OBSERVERS:

Aasha Cowey Assistant Director of Digital Transformation and Innovation
Edward Roberts Interim Assistant Director of Finance

01/25 PROCEDURAL MATTERS

Jayne Beeslee welcomed all to the meeting, notably, Aasha Cowey and Edward Roberts and reminded attendees that the meeting was being audio recorded. Members noted that any declarations of interest were contained within the Trust's Register of Interests.

Minutes: The minutes of the open session held on 19 November 2024 were considered by the Committee and confirmed as a correct record.

Action Log: Action 91/24: Audit Tracker, Data Quality Internal Audit. *For the FPC to proactively monitor the actions generated from the Data Quality Internal Audit (24/25) over the coming year, via the future Audit Tracker reports. This will allow the FPC to monitor the discussions / progress on recruitment in Digital and how issues of data quality might be addressed.* The Corporate Governance Team will ensure that the Audit Tracker is annotated to reflect this focus and the Committee's Cycle of Business (CoB)/Planner will be updated to reflect this agreed focus. Once the Audit Tracker and CoB/Planner artefacts have been updated this action can be proposed for closure. Trish Mills advised that part of the work involved the tracking and monitoring of actions to see what the impact was. The Audit Tracker paper being presented at the next meeting will provide an additional focus going forward. Action Closed

Committee Highlight report – 19 November 2024:

The Committee highlight report dated 19 November 2024 was received.

RESOLVED: The

- (1) Minutes of the meeting held on 19 November 2024 were confirmed as a correct record.**
- (2) Action log was considered and updated as described above.**
- (3) Committee highlight report dated 19 November 2024 was received.**

02/25 OPERATIONAL UPDATE QUARTER 3 (October – December 2024)

Lee Brooks presented the report and drew the Committee's attention to the following areas:

Specialist Operations Response Team (SORT). Additional funding has been secured from Welsh Government for SORT and efforts were underway to grow the team. The capital funding for vehicles cannot be spent in year with insufficient time for procurement and so colleagues are actively discussing roll over to next financial year.

Volunteering: The Volunteer team has successfully completed an Organisational Change Process (OCP) and was now operating in the new Function Based Model. In October, the Volunteer Conference was held in a new and successful hub and spoke format, with the conference held in Llandudno and streamed to Swansea with over 100 volunteers attending both events.

Manchester Arena Inquiry (MAI) Progress against the 68 recommendations, directly or through partnership working, that related to the Trust, continued. Work on the Grenfell Fire Inquiry report was complete and provided to Commissioners as supplementary to the Manchester Arena Inquiry submission. The report will be included in the Annual Emergency Preparedness Resilience and Response (EPPR) scrutiny papers for this Committee.

Red Code Breathing Problem: The Operations Quality team has been examining the increase in incidents related to ineffective breathing over an extended period. Numerous reports have been prepared for both the Operations Senior Leadership Team and the Executive Leadership Team, reviewing the rise in Red calls since 2019.

EMS Coordination Restructure and Reconfiguration: The restructure and reconfiguration programme went live on the week of the 25 November 2024. This was probably the most significant change control rooms have experienced in decades and marks the start of a new era for EMS Coordination with improved ways of working.

December Critical Incident: There was a critical incident declared on 30 December 2024 which was due to high patient queue numbers (340 at the time the incident was declared) with half of the ambulance fleet outside Emergency Departments. There will be some reflection on the broader system response to the critical incident. Whilst this was not a major incident it was felt that the system response was insufficient for the Trust to respond to the significant numbers of patients needing help.

Clinical Model Transformation: The Clinical Model Transformation (CMT) has continued to be a significant focus throughout this quarter. CMT changes in December have shown benefits for patients, with positive indications in consult and close rates. It was noted that more evaluation was underway.

Welsh Improvement Plan 2024: The 111 Service Welsh Improvement Plan 2024 addressed the challenges and measures implemented to enhance the performance of the 111 service in handling Welsh-language calls. Performance at the Start of 2024 answer rate ranged between 50–58% and has increased to 75%. During the summer, a targeted plan was developed to address the issues and improve the Welsh-language call handling this is ongoing, and work will continue to improve access for our Welsh speaking callers.

The Chair was reassured regarding the debrief in terms of the critical incident and noted that further information was contained in the MIQPR. He was also pleased to hear about the success of the volunteering conference.

Peter Curan sought clarity on the funding of a palliative care vehicle which supported the existing services in Swansea Bay and also sought clarity on the coverage area in Wales of the Mental Health Response Vehicles (MHRV). Lee Brooks commented that the Palliative Care Vehicle was supported in the Hywell Dda Health Board area. In terms of the MHSV, this covered the three South East Health Boards. Lee Brooks added that the decision to proceed with the MHRV and its coverage area was determined by the Trust, not directed by the Health Boards.

RESOLVED: The Quarter 3 (October – December 2024) operations update was noted.

03/25 FINANCIAL POSITION FOR MONTH EIGHT AND MONTH NINE 2024/25

Chris Turley gave a presentation on the financial position of the Trust as at month nine and drew attention to the following areas:

1. The cumulative year to date (Month 9, end of December 2024) revenue financial position reported was an underspend against budget of £0.042m.
2. The Capital plan was being progressed and the current planned expenditure of £20.449m is forecast to be fully spent by the end of the financial year.
3. Most directorates were in line with the budget plan for Month 09 2024/25.
4. There had previously been reported an in year risk related to the Emergency Medical Technician (EMT) Band 5 development, which has now reduced to zero in year. This was because the Trust has reached a point where it can cover the costs for the current year. The situation was not sustainable in the long-term however and will need to be considered within the 2025/26 financial planning. This will therefore remain a risk going into the next financial year.
5. Additionally, members noted there was a technical risk related to the pay awards for 2024/25. Welsh Government has requested invoices for 75% of the anticipated costs however not all costs will be received until the discrepancies between the actual and modelled figures (across NHS Wales) were sorted. This was however consider to be a low risk.
6. In terms of savings the Trust was overachieving on the recurrent elements and was forecasting to deliver the savings as described in the table within the report.
7. In terms of Capital spending, further money has started to flow through, but there have been a few variations in estate schemes since the November update. Today's agenda includes a fleet plan for the next five years, which includes the business case for next year's funding. Welsh Government funding indications of this being positively received provide flexibility to manage this over this financial year end. This might include the purchasing vehicles in March, using any year end variations in current funding, with the assurance of next year's funding to cover these purchases, alongside the associated conversions.

Peter Curran highlighted the difficulty of balancing the budget without making surpluses or deficits, commending the team for their achievement. Peter noted the EMT Band 5 position for this year and that it may not be sustainable in the future and will be discussed in next year's budget. He asked about the 75% government instruction, questioning if it was normal

and why it existed. Chris Turley explained it was a cash flow issue and was more relevant to Health Boards, with cash getting tighter as capital spending increased.

The Chair noted a small surplus was being reported which was encouraging and was assured particularly around the discipline of managing, forecasting and budgeting.

RESOLVED: That the Finance and Performance Committee:

- (1) Noted and gained assurance in relation to the Month 8 revenue financial position and performance of the Trust as at 30th November 2024.**
- (2) Noted the delivery of the 2024/25 savings plan, and the context of this within the overall financial position of the Trust.**
- (3) Noted the capital programme update for 2024/25, and**
- (4) Noted the Month 8 Welsh Government monitoring returns submission included within *Appendices 1 – 2* (as required by WG).**
- (5) Noted the update to the Month 9 position provided via the slide deck presented to the meeting.**

04/25 FINANCIAL SUSTAINABILITY PROGRAMME POSITION PAPER

Carl Kneeshaw presented the report and drew attention to the following key points:

1. A savings target of £6.4m was set for the 2024/25 financial year, a £400,000 uplift on 2023/24.
2. Service and Provision Reviews: This area looked to provide an evidence-base for long-term efficiency across the organisation by undertaking an audit of Administrative and Support Staff provision, and an audit of Service provision across the organisation which will establish the basis for an annual review process.
3. The Head of Commercial advert closed on 13 January with thirteen applications received - these were now in the process of being shortlisted. There will be an oversight group ensuring the Head of Commercial will have the necessary backing and guidance within the Trust.

Rachel Marsh mentioned that the Head of Commercial role was an arm of the wider financial sustainability program, focusing on income generation opportunities and business development. The role will involve looking for new markets and maximizing existing opportunities to generate profit, which will then be reinvested into the Trust. Rachel also noted that a consultancy firm had previously identified potential commercial opportunities, and the new Head of Commercial will build on this work. Additionally, there were plans to create an oversight group to support the Head of Commercial, leveraging the experience of other directors and individuals within the Trust.

Chris Turley elaborated on the financial sustainability program, emphasising that it has two main strands: income generation (including commercial activity) and expenditure

management (efficiency and cost savings). He highlighted that the commercial activity was a significant part of the income generation strand but not the only part. Chris Turley also mentioned the importance of the service review outcomes, which will help frame future financial sustainability efforts. He acknowledged that while the Trust has not had to press too hard on these aspects this year, the focus will likely shift significantly next year due to broader financial challenges.

It was requested that further detail and clarity was provided on the context and rationale of the strategic intent and integration of the financial sustainability programme with broader strategic objectives, potentially involving Angie Lewis for historical context and alignment with the IMTP. It was agreed an update would be provided to the Chair.

Peter Curran supported the overall direction, highlighting the important role the Head of Commercial will play. He also noted that there may be some parallels with the role of the Head of Charity.

Jonny Sammut added, touching on Peter's point about parallels, he noted an auxiliary benefit from exploring commercial opportunities. This could naturally lead to research, development, and innovation work.

Trish Mills commented that as the Trust prepared to set Risk Appetite Statements in the coming week, it was important to consider this discussion on how much it wanted to push boundaries and appetite for risk in this area.

Carl Kneeshaw commented that the discussion had been useful, especially as the Trust enters the next planning round for IMTP. A recurring theme was change saturation and the additional workload on staff. Prioritisation was needed to balance aspirations with realistic goals over the next few years, considering available resources. It was crucial to take the team along in this journey, focusing on financial sustainability and overall organisational sustainability. The feedback from this discussion will be incorporated into planning and proposals moving forward.

RESOLVED: The Finance and Performance Committee Noted the Month 8 and 9 Position Report.

05/25 INTEGRATED MEDIUM TERM PLAN (IMTP) DELIVERY/ASSURANCE - PROGRESS UPDATE 2024/27 and IMTP 2025/28

Rachel Marsh updated the Committee on the following reports:

Integrated Medium Term Plan (IMTP) Delivery/Assurance Progress Update 2024/27

Rachel Marsh presented the paper as read, commenting that it comprehensively outlined progress against last year's IMTP objectives and the Cabinet Secretary's priorities. It highlighted significant actions taken this year, though some areas have not progressed as much as desired due to various challenges. Overall, the Trust has set clear ambitions and

delivered on many goals. The paper was also reviewed recently in the Strategic Transformation Board.

The Chair referred to the regular meetings with Health Boards and raised a question about ensuring integration and awareness of plans being developed in other parts of the system, acknowledging the difficulty of being part of a larger system. Rachel Marsh explained there had been monthly or bimonthly meetings with Health Boards arranged via the Commissioner, which have been helpful. Recently, there have not been any meetings as the new Joint Commissioning Committee (JCC) was still establishing its structures. They plan to recreate these meetings next year, potentially at a regional level. To ensure wider engagement, senior leaders in the Operations Directorate, integrated care, and specific people in the Quality and Clinical Directorates were linked to Health Boards and attended regular meetings.

Following a query on the sickness rate, Carl Kneeshaw commented that staff sickness has increased slightly to about 8%, which was typical for this time of year due to seasonal flu and other viral conditions. The ongoing organisational changes and frontline demands were also contributing to exhaustion and burnout, affecting attendance levels. Well-being initiatives were in place to provide support and signposting, especially in areas with high sickness absence. Local managers were actively seeking feedback and adjusting work structures. The current sickness rate was consistent with other ambulance services across the country, and while it has increased over the festive period, the Trust was not an outlier.

RESOLVED: The Finance and Performance Committee:

- (1) Noted the Clinical Model Transformation programme progress update.**
- (2) Noted the confirmed Directorate-led IMTP end of Q2 position.**
- (3) Noted the update against the Cabinet Secretary's priorities set out in the 2024-27 planning framework.**

Integrated Medium-Term Plan (IMTP) 2025 – 2028 - Progress In Developing The Plan

Rachel Marsh advised the Committee that the plans from each directorate have been reviewed. A meeting was planned on 3 February 2025 to align the plans with the associated finances with the aim to determine what can be afforded next year. The draft IMTP was being prepared for presentation to the Executive Leadership Team (ELT) on 12 February 2025 after which it will be circulated to the Board and Committee members. There will be a full discussion at this Committee in March focusing on the finances and outcomes.

Chris Turley advised the Committee that NHS Wales had issued the allocation letter on 20 December 2024, directed to Health Boards and Public Health Wales. As the Trust was commissioned by Health Boards, the general uplift for inflationary and cost pressures was expected to be passed through to providers. This instruction has been in place for several years. The 2025/26 funding and outlook was likely to be challenging due to the next year's uplift being 1.77%, down from 3.67% for this financial year. On top of this, there are financial planning guidelines issued by WG that state funding for the cost of the 2025/26 pay awards and the additional Employers National Insurance costs from 6th April 2025 should be

assumed. The 1.77% uplift, if fully passed through, will only cover the full-year effect of this year's cost increases and currently known unavoidable cost pressures for 2025/26.

However, it will not fully cover the costs of the Emergency Medical Technician (EMT) Band 5 positions for 2025/26, and there is currently no indication of separate funding for this change. Welsh Government (WG) has made it clear that this is a matter for negotiation between the Trust and the Commissioners. The prescribed 2% savings requirement also included in the Allocation Letter equates to about c£6.5 million. Currently, there is therefore a gap of c£3.5-4 million, but there was confidence that this can be closed through the further identification of savings between now and the plan submission. However, this would then leave no funding for any new commitments or other unavoidable costs from 1 April 2025. It is likely therefore at this stage that the underpinning financial plan within the IMTP, whilst hoping to still be presented as a revenue balanced financial plan, will have some residual financial gap and risk to further manage as we enter and go through the early parts of the 2025/26 financial year. This residual gap is likely to be in the region of a minimum of £2m.

Chris Turley highlighted several risks associated with not having a balanced financial for the next year.

1. The 1.77% uplift in funding was significantly lower than the previous year's 3.67%, which posed a challenge in covering the full-year effect of costs introduced this year and known inflationary and other unavoidable cost pressures.
2. The funding does not cover the costs of the EMT Band 5 development, and there was no indication that this will be separately funded next year.
3. There was a prescribed assumption that NHS organisations need to deliver at least a 2% savings requirement, which translated to about c£6.5 million for the Trust. Currently, there was a gap of about £3.5-4 million to achieve this, but this was expected to be closed before the plan submission at the end of March.
4. Without additional funding or further savings or in year cost management, there will be no capacity to support any new initiatives or any further unavoidable additional costs from April 1st, 2025.
5. If a balanced plan cannot be achieved, the Trust will need to inform the government and outline the consequences, including potential impacts on quality and patient safety.

Members recognised that the current landscape was challenging, highlighting that additional costs were unaffordable. It was clear that additional national cost pressures outside of the Trust's control should be externally funded. Chris Turley added that the challenge for next year was significantly greater due to the current cost pressures including in particular the recurring (and increasing) costs of the Emergency Ambulance Practitioner (EAP) B5 development. There was an option to create and present a plan that has the ability to balance in year, but that this will inevitably come at higher risk, and this would involve greater impacts and more difficult choices. The cost pressures and the gap to close were much larger with these costs in the system. The Trust was working through several options and their implications over the next month.

Trish Mills emphasised the importance of the Committee being forearmed with the challenges around next year's budget, given the timetable of the Board, the allocation letter, and the prioritisation exercise. She suggested drawing out these challenges in the AAA report for the Board to ensure they were aware immediately after this meeting and at the next Board meeting.

RESOLVED: The Finance and Performance Committee:

- (1) Noted the overall progress in developing the IMTP.**
- (2) Noted the financial and budget setting assumptions and challenges following issuing of the Health Board allocation letters.**
- (3) Noted the approach and timelines set out in the report.**
- (4) Advised of any further assurance required during the final stages of the planning cycle.**

06/25 MONTHLY INTEGRATED QUALITY PERFORMANCE REPORT – OCTOBER/NOVEMBER 2024

Rachel Marsh presented the report and drew out the following key points:

1. Data quality issues have been identified and are being addressed within 111, Advanced Paramedic Practitioner (APP) and throughout the quality indicators, with the result that there are several Board approved metrics which were not available at this time.
2. The response times to 999 callers remained a key concern with Red 8 minute performance at 47.55 % in November 2024 and Amber 1 median at 1 hour and 56 minutes.
3. The Trust lost 20,995 hours to handover in November 2024. This level of lost capacity was difficult to compensate for, despite all the actions being taken by the Trust.
4. The 2024/25 budget includes further investment in activities designed to shift demand left and mitigate the impact of handover lost hours investing in clinical screening and APPs, which form part of the Clinical Model Transformation (CMT) Programme.
5. 111 call handling performance has stabilised post-delivery of the new 111 Clinical Assessment Software (CAS) and was improving, achieving the 5% abandonment rate in November 2024. Planned production for December has been boosted, based on demand forecasts, and as part of the Trust's winter planning.
6. Ambulance Care, in particular, Non-Emergency Patient Transport Service's (NEPTS) performance was stable, with oncology remaining above target, however, renal performance dropping below target for the second consecutive month since March 2020.

7. The Trust continued to focus on its people, with a range of actions in place to improve workplace experience including, for example, reducing shift overruns, whilst also continuing with the more strategic focus on the People & Culture Plan. Sickness absence was 8% in November 2024 just maintaining the consistency of being below 8% since March 2024.
8. The Trust was continuing to deliver its CMT programme at pace, with key parts going live in December, in particular, remote clinical screening (RCS).

Lee Brooks advised the Committee of the December data which was caveated that it was not yet verified:

1. Emergency Medical Service (EMS) capacity remained strong, aided by sustaining the lower absenteeism compared to previous years. Additional third-party provision during Christmas Eve, Christmas Day and Boxing Day helped uplift UHP by 4-6%, attending 75 incidents.
2. December's Red performance was 47.6%, compared to 48.9% for December last year, and consistent with November 2024 performance. Red activity continued to grow, with a significant number of red breathing problems, with noticeable uplift experienced in the 0-4 age group. Interventions in 111 streaming helped reduce unnecessary 999 demand originating from 111.
3. Amber median response time in December was three hours, up from one hour and 40 minutes last year, due to high red activity and more than 25,000 hours lost to handover delays.
4. Respiratory Syncytial Virus (RSV) cases for 0-4 year olds peaked shortly before Christmas, but flu showed a double peak (first before Christmas, and the second occurring now), adding stress to hospitals and exacerbating handover delays.
5. Mobilisation times improved for the second consecutive month for both Emergency Ambulances and Cymru High Acuity Response Unit (CHARU) in red and amber categories.
6. The 999 Answer Rate dipped to 86% in six seconds in December, with 51,500 calls offered. Median answer times remained strong despite higher absenteeism in 999 call handling.
7. Positive indications of consult and close rates around 20%, pending validation. It offered some assurance that activity brought into the Trust with the removal of Can't Send from the Clinical Safety Plan, was being appropriately managed, with outcomes remaining consistently distributed across available dispositions.
8. Urgent Care Service (UCS) utilisation initially reduced following dispatch changes (to ensure staff attended only those patients within their scope or practice) but has picked

up again as changes to flow and removal of Can't Send from the Clinical Safety Plan was implemented, ensuring UCS responded to appropriate calls.

9. NHS Wales 111 Service abandonment rate increased to 14.7% in December due to higher activity. Clinical ring back times for P1 remained above 90%, but P2 and P3 showed some delays. It was explained to the committee how 111 has completed more clinical assessments in December than before, and that potentially removal of Can't Send may require additional capacity. Analysis by the operational team suggested that demand profiling for a weekend following a bank holiday may need uplifting.
10. Additional funding from the Joint Commissioning Committee (JCC) provided for Non Emergency Patient Transport Service (NEPTS) provision to help with flow until end of financial year.

The Chair's preference was to have the report a week before, even if it did not contain the latest data. The detailed update for December, with references to the previous year, was valuable for translation into the AAA report for the Board. The December data will be included, which will help focus discussions at the Board level.

RESOLVED: The Committee received the October/November 2024 update and the unverified December 2024 Integrated Quality and Performance Report and noted that it provided sufficient assurance for the Committee against progress against the performance indicators.

07/25 DIGITAL REPORTING

Jonny Sammut updated the Committee on the following areas:

1. The procurement exercise for the drones project has concluded with an anticipated operational go-live by end of March 2025.
2. The NHS Wales 111 website still receives good use; however, engagement rates have seen a decreasing trend. Enhancements to the website were ongoing and further work is being progressed via the digital front end and the CMT programme. An internal audit on the 111 website has commenced.
3. Records requests continue to be received at a sustained high level and showing similar levels of demand year-to-date as seen in 2023/24 (which was +10% increase on previous years). The average turnaround time for non-trivial requests to the IT service desk peaked in October to 47 days (40 days in the last reporting period), however that reduced to 28 days in November.
4. Good system availability performance was reported, with performance still above the UK industry standard of 99.9%.
5. The emergency services network outline business case was expected by the end of April 2025, with a separate deep dive session to be planned.

6. The CMT required significant input from various digital teams. These requirements were not known at the time of writing the Digital Plan, resulting in many pre-agreed priorities and timelines for 2024/25 being paused or at risk. Further detail on the impact will be presented at the March 2025 Committee meeting.
7. The Power Bi migration was now complete, and the Trust was in the process of decommissioning some of the old Qlik servers. This was going well and will have a positive impact in terms of the Trust's cybersecurity.
8. Cloud exploration was currently underway to move the on-premises data warehouse to a cloud-based solution. This transition aimed to improve cost, storage efficiency, and the speed of reporting platforms.
9. The cyber risk score was currently at 15 and was in the process of being increased to 20, primarily in response to global conditions. This change will be formally communicated by the next Committee meeting. Further details will be discussed in the closed session of today's meeting.
10. The emergency services network outline business case, which covered communications between the contact centre and vehicles, will be presented around the end of April 2025. A separate session outside the formal committee will likely be hosted for a deep dive into this topic.

Trish Mills mentioned there was a Board Development session scheduled for February 2025, focusing on cyber security. An external provider will be coming in to offer more in-depth development specifically for this Committee.

Following a query in respect of drones and their use in the future, Jonny Sammut explained that the starting point involved clarifying procedures with the Civil Aviation Authority, establishing operating procedures, conducting pre-flight checks, and maintaining a good training cadence. The plan aims to ensure sufficient cover within the broader operational teams, with the long-term goal of achieving beyond visual line of sight delivery of equipment.

Jonny Sammut updated the Committee on the progress being made in terms of recruitment, with approximately 14 roles still to be filled. These roles were at various stages, with interviews occurring weekly.

Internal Audit- 111 Digital Operations

Jonny Sammut referred to the recent internal audit report on the 111 digital operation Clinical Assessment Software replacement tool which tested three areas: monitoring of digital services (reliability, security, data protection), staff usage (adoption, training, support, skills), and tool management (contracts, service provision). The audit provided substantial assurance, reflecting positively on the team's efforts. This will be presented to the Audit Committee, and the team was proud of the positive independent assessment.

Trish Mills added it was important to celebrate the substantial assurance, especially with no recommendations. This achievement was significant because it goes beyond just introducing a new software system. It will be highlighted in the alert section for the Board to recognise this good news.

RESOLVED: The Committee noted the contents of the Digital Report and the trends in metrics presented.

08/25 INFORMATION GOVERNANCE REPORTING

Jonny Sammut presented the report and drew the Committee's attention the following points:

1. Following an internal audit earlier in the year, several audit management actions related to Data Quality (DQ) and DQ Assurance need to be undertaken. In November 2024, the update highlighted outstanding actions, particularly one related to reporting routes. The group discussed the distinction between operational and clinical data quality, agreeing that specific elements of DQ should also pass through to the Quality & Performance Management Framework steering group as appropriate. Of the five actions due in Q3 2024/25, three were proposed for closure, and two requested date revisions due to capacity constraints.
2. Challenges related to lawful data sharing of patient information with the wider NHS Wales organisations via Digital Health and Care Wales (DHCW) were highlighted. This will be revisited following legal advice and further discussions with DHCW in particular related to the common law duty of confidentiality.
3. Records Management: Although some progress has been made with actions in the plan (e.g. review of the Records Management Policy), the plan itself and the timelines have not been able to be updated for several months due to a long-term absence in the team and increasing demand for records
4. Improvement actions on the Information Governance (IG) toolkit were achieved on target with the team working on the March 2025 toolkit submission.
5. IG Training compliance rate was at 78% in November 2024, which exceeded the previous year's 75% target, however the new target was 85%, and that was required to be met by March 2025 as part of the IG toolkit.
6. Members reviewed corporate risk 623 which related to failure to comply with data protection legislation (rated 15) and noted the importance of meeting standards on the IG Toolkit, particularly as it related to research.
7. Freedom of Information Act (FOI) requests increased from 43% in July to 72% in August and 64% in September, however this remained under target which is 90%. Resourcing has been a factor here as well as improvements needed to process which

will commence in 2025. The total number of questions received across all FOIs has increased, exacerbating the issues.

The Committee noted the clear rationale for changing some response dates in the audit report, and that progress was being made on the actions. The paper was comprehensive, and it was pleasing to hear about the progress on recruitment.

RESOLVED: The Committee noted the update.

09/25 ENVIRONMENT, DECARBONISATION AND SUSTAINABILITY UPDATE - AS AT DECEMBER 2024

Chris Turley presented the report as read and highlighted several key areas in the report for the Committee's attention:

1. The majority of the red rated actions on the Trust's Decarbonisation Action Plan (DAP) required further investment or were dependent on external factors.
2. The DAP risk 542 remained at a score of 16 and was regularly reviewed.
3. The most recent Decarbonisation Co-ordination Reporting (DCR) to NHS Wales Shared Services Partnership in October 2024 maintained an overall Amber status.
4. Various schemes were being delivered under the Welsh Government Estates and Facilities Advisory Board (EFAB) funding for 2024/25, with a significant portion of the funding awarded to the Trust. Updates on specific projects were provided to the committee with no escalations.
5. There will be one common single responder vehicle across all solo response EMS service lines, with a move from a car to a van to accommodate kit and provide a more generic vehicle.
6. In line with Trust's DAP commitment, the next 20 vehicles will be plug in hybrid, with a pilot of 10 full electric vehicles (cars/vans) planned for early 2025/26. Further work was being carried out to address operational practices, charging processes, and vehicle locations.
7. The overall aim of the DAP was to reduce emissions in line with the contribution to Welsh Government being at net zero by 2030. For the Trust that equated to a 33% reduction in the 2018 emissions baseline, with members noting this has been challenging to measure, not least due to changes to the baseline.

Peter Curran queried if the Trust had a baseline position, metrics, targets, and timelines associated with Decarbonisation. Chris Turley explained that WG had set a target for an initial 33% reduction in emissions from a 2018 baseline. However, the baseline has changed every year since 2018, making it difficult to measure progress. An annual report was provided in September, detailing the delivery of this target as accurately as possible.

Chris Turley added that the Trust was piloting 10 fully electric vehicles, transitioning from car-based to van-based single responder vehicles. This year, it was procuring 30 replacements, with 20 being plug-in hybrids and 10 fully electric. The pilot involved determining optimal placement, infrastructure, and charging logistics. Diesel vehicle backups will be available during the pilot phase to ensure operational continuity.

RESOLVED: The Committee noted the Environment, Decarbonisation and Sustainability update.

10/25 FIRE SAFETY ANNUAL REPORT

Chris Turley presented the Annual Fire Safety Compliance Report for the Trust's estate, which focused on emergency lighting, fire alarm systems, and fire risk assessments (FRAs). The report was proving to be of additional use to operational teams managing larger sites. There were no escalations to the Board, however of note:

1. All emergency lighting systems have been serviced and maintained, ensuring full compliance with statutory obligations. However, monthly 'flick' tests were not being carried out at all ambulance stations.
2. Bi-annual servicing and maintenance of fire alarm systems were being completed across all Trust owned sites. Weekly fire alarm testing was being conducted at larger corporate and contact centre sites.
3. All Trust sites have current FRAs, with several sites due for renewal in the new financial year. The FRAs provide an overview of each site's performance against statutory obligations and document recommendations in a remedial action plan.
4. Annual fire drills have been added to the 3i Studio Computer Aided Facility Management (CAFM) system, with Estates managing the annual program for fire drills across all Trust sites.
5. There has been a significant increase in the number of trained fire marshals across the Trust estate.

RESOLVED: The Committee:

- (1) Received the 2024 Fire Safety Annual Report and noted the update and progress made since the appointment of a more dedicated facilities team to progress with the improvement of fire safety compliance across all Trust sites.**
- (2) Noted the appointment of a new Fire safety advisor, namely Anolex Fire.**
- (3) Noted the changes made to the training of fire marshals through Thomas Carroll Management Services.**

11/25 RISK MANAGEMENT AND BOARD ASSURANCE FRAMEWORK REPORT

Trish Mills, prior to the updated highlighted an error in the report: paragraph four in the Executive Summary states this was the same Board Assurance Framework (BAF received in November, it is not, it is the same BAF that the Board received in November.

Members received assurance on the risks within the Committee's remit as well as the Trust's two highest scoring risks within the Quality Patient and Experience Safety Committee (QuEST) remit for oversight, noting that the data was the same as that presented to Trust Board in November 2024 due to reporting cycles.

Risk 594 (civil contingency risk) has reduced in score in the latest review from 20 to 15.

A new risk was added to the corporate risk register and will be presented to the January board meeting. This was Risk 641 related to the Manchester Arena Inquiry with a score of 20. Members noted that a considerable number of Inquiry recommendations have been implemented without additional investment, which has allowed for a reduction in the initial risk score. The remaining recommendations required external support and financial investment to be fully implemented. The scale of the investment was significant and formal discussions with Commissioners will begin this month.

Other Risks Raised:

A risk of physical security risk related to loss and theft of equipment has been drafted with a rating of 12. This was being progressed through usual risk management cycles.

The annual fire safety report noted several actions arising from fire risk assessments. These risks were being managed and addressed through various measures, including the appointment of a dedicated facilities team, the new fire safety advisor Anolex Fire, and changes to fire marshal training.

Lee Brooks further updated the Committee on the new risk 641, which has involved significant work to transition from project resources to a business-as-usual approach for monitoring outstanding matters from the Manchester Arena inquiry. The inquiry has highlighted areas of vulnerability, and while many recommendations have been implemented, gaps remain that required external support. Some recommendations will be closed by March 2025, but others depended on external funding. A detailed breakdown of recommendations will be discussed in closed sessions. Any significant changes will be reported to the Board, as progress depended on financial investment.

Peter Curran expressed his concern about the uncertainty of funding, with Welsh Government and Commissioners batting back and forth on who will pay. It was important to use this situation effectively to ensure all stakeholders recognise the risks of not receiving additional funding. Lee Brooks added the risk was highlighted to ensure it was addressed by the Trust Board by the end of the month, as conversations with Commissioners were intensifying.

RESOLVED: The Committee:

- (1) **Noted the contents of the report and endorsed the addition of Risk 641 (*the Trust's inability to implement the learning from all relevant Manchester Arena Inquiry (MAI) recommendations impacting its response to a major incident/mass casualty incident*) on the Corporate Risk Register.**
- (2) **Were expected to receive details on the potential changes in the risk in terms of Cyber.**

12/25 COMMITTEE PRIORITIES AND CYCLE MONITORING REPORT

The report was noted.

RESOLVED: The Committee noted the update.

13/25 REFLECTION: SUMMARY OF DECISIONS AND ACTIONS

Financial Sustainability Programme: Further detail and clarity was sought on the context and rationale of the strategic intent and integration of the financial sustainability programme with broader strategic objectives, potentially involving Angie Lewis for historical context and alignment with the IMTP. It was agreed an update would be provided to the Chair.

The Hybrid meeting worked well, papers were well presented and there needs to be an overview of timings for each item.

Rachel Marsh noted there were challenges in performance areas, particularly where more information was needed to understand why performance was not meeting expectations. She emphasised the importance of having detailed discussions on specific metrics relevant to the Committee to better understand and address areas where performance was lacking.

Peter Curan reflected it was a very comprehensive and insightful meeting. Balancing the budget and ensuring efficient resource deployment were significant challenges, especially with external factors at play. Given the upcoming challenges, focusing on financial sustainability and exploring income generation options would be crucial.

Trish Mills added that at the next meeting the Committee would spend more time on Committee effectiveness.

Meeting concluded at 12:15

Date of Next Meeting: 18 March 2025.