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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.

<b>Trust Board Meeting Date</b>	30 January 2025
<b>Committee Meeting Date</b>	16 January 2025
<b>Chair</b>	Jayne Beeslee

### KEY ESCALATION AND DISCUSSION POINTS

#### ALERT

(Alert the Board to areas of attention)

- Members discussed the **financial allocation for 2025/26**, noting an uplift to Health Boards of 1.77% compared to 3.67% this year. It is expected that this uplift will be passed through to providers, as has been the case in previous years. The only other funding assumed within the financial planning principles is for pay awards and the impact of the increase to employers National Insurance. The allocation letter also prescribes a savings target of at least 2%, which amounts to about £6.5 million for WAST.
- The challenges that this poses for planning as part of the 2025-28 IMTP were stressed, including the fact that the allocation does not fully cover EMT band 5 costs, and there is no indication that these will be separately funded this year. Welsh Government has made it clear that this will not be for them to fund direct, and that it needs to be discussed and negotiated with Commissioners (Health Boards) as part of the overall Resource Envelope being made available for WAST for 2025/26 and beyond.. Members were advised that currently we are unable to commit to any additionality in 2025/26 beyond that which we are currently obligated to do, without an agreed funding source, or offsetting savings delivery (over and above the c£6.5m currently required to balance committed expenditure). Accountable Officer (AO) letters are due to Welsh Government by 14 February therefore further prioritisation and costing of the IMTP is underway, following which it will need to be agreed how any such AO letter from WAST is framed. Whilst there is a route to a balanced budget for 2025-26, this does not include additionality without further stretching the savings target. The board will receive a further update at its 30 January meeting.
- The Internal Audit on **111 Digital Operations** focused on the new 111 system, provided by MIS Emergency Systems Ltd and Priority Dispatch Solutions (CAS replacement tool). **The audit returned substantial assurance** overall with no recommendations for action. Members commended the teams on this excellent result, particularly given the challenges in implementing the new system. Board members will note the following from the report:



- The system has been successfully implemented onto a secure architecture which provides improved security and resilience.
- There are processes for monitoring performance of the system to prevent incidents and an appropriate system administration process in place.
- Training was provided to all staff prior to implementation, and enhanced support was available to staff in the early stages. Ongoing training is provided to new staff and performance of users is monitored.
- The contract sets out the required system performance and there are regular review meetings between WAST and the supplier to ensure system performance is appropriate and to discuss any identified issues.

## ADVISE

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

4. An update on the progress of developing the **IMTP for 2025-28** was received detailing the planning cycle and feedback from the Collaborative Planning Workshop event held in October, the board development session held in December and the prioritisation exercise held on 8 January. The draft IMTP will be circulated to board members for review and comment in February ahead of its presentation for endorsement at the March committee meeting, and for approval at the March board meeting. The challenge of the 2025/26 financial allocation and the resulting impact on the affordability of the emerging IMPT is outlined in the alert section above.
5. Members received the **Operations Quarterly Report for Q3**. Lee Brooks provided a comprehensive update on various operational aspects, highlighting progress, challenges, and future plans. Of note:
  - Additional funding has been secured from Welsh Government for the Specialist Operations Response Team (SORT) and efforts are 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.
  - The Volunteer Conference in October was well-received and it is intended to provide a conference later in 2025.
  - Work on the Grenfell Fire Inquiry report is complete and provided to commissioners as supplementary to the Manchester Arena Inquiry submission, and the report will be included in the annual EPRR scrutiny papers for this committee.
  - Development of the corporate risk related to the Manchester Arena inquiry is progressing, with 18 recommendations connected to submissions (see further below).
  - News that the first workshop for E-timesheets is underway was welcomed.
  - The Emergency Medical Services Coordination (EMSC) reconfiguration, including new management structures and a single allocator model, is complete. There is recognition that there is a need to now give EMSC some respite from changes save for those associated with estate moves in North Wales, and change associated with our evolving Clinical Services Model.
  - The critical incident declared on 30th December 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 WAST



to respond to the significant numbers of patients needing our help and we do already have a corporate risk associated with this challenge.

- Clinical Model Transformation (CMT) changes in December have shown benefits for patients, with positive indications in consult close rates. More evaluation is underway.
  - The Welsh language answer rate in 111 has recovered after a dip with answer rates up to 70%.
6. Members **reflected** that the hybrid meeting approach worked well with just over half of participants online. Papers were clear and well presented, however there is a desire to ensure that sufficient time is allocated to items so that the meeting runs to time (which it did). The question as to whether deep dives are needed on aspects of the MIQPR to ensure that the committee is challenging where there is poor performance was posed, and the Chair will raise this with NEDs. Members commended the assurance received from directors and noted that 2025/26 will be a more challenging year, stressing there was a need to be clear on what was in, and outside of, our control. The committee welcomed observers who commented that they felt welcomed and enjoyed the discussion.

## ASSURE

(Detail here assurance items the Committee receives)

*The following items will also be presented to board at their 30 January meeting however members may benefit from the following points of discussion from the committee:*

### **Financial Position for Months 8 and 9 2024/25**

7. Members noted that the year to date position shows a £43, 000 underspend, with forecasted breakeven by the end of the financial year. The capital spend has begun to flow as expected towards quarter four, and savings continue to be delivered as planned. The overall financial position is stable, with few variations in the delegated budgets.
8. There is an in year risk related to the EMT Band 5 development, which has reduced to zero. This is because the organisation has reached a point where it can cover the costs for the current year. The situation is not sustainable in the long-term however and will need be considered within the 2025/26 financial planning. This will therefore remain a risk going into the next financial year.
9. Additionally, members noted that there is 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). This is considered to be a technical risk because receipt of the remaining 25% is not at a material risk.

### **Monthly Integrated Quality and Performance Report (MIQPR) for October/November 2024.**

10. December 2024 data was not available in the MIQPR for this committee (but will be for January board). The committee were updated on activity and performance during this crucial period, noting:
- 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.



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- December data was caveated that it was not yet verified. December's red performance was 47.6%, compared to 48.9% for December last year, and consistent with November 2024 performance. Red activity continues 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.
  - 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.
  - Respiratory Syncytial Virus (RSV) cases for 0-4 year olds peaked shortly before Christmas, but flu shows a double peak (first before Christmas, and the second occurring now), adding stress to hospitals and exacerbating handover delays.
  - Mobilisation times improved for the second consecutive month for both Emergency Ambulances and CHARU in red and amber categories.
  - 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.
  - Positive indications of consult and close rates around 20%, pending validation. It offers some assurance that activity brought into the Trust with the removal of Can't Send from the Clinical Safety Plan, is being appropriately managed, with outcomes remaining consistently distributed across available dispositions.
  - 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.
  - 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 suggests that our demand profiling for a weekend following a bank holiday may need uplifting.
  - Additional funding from JCC provided for NEPTS provision to help with flow until end of financial year.
  - Committee noted that there will be an expected dip in PADR and statutory and mandatory compliance due to operational priorities during winter pressures.
11. The **Integrated Medium Term Plan (IMTP) Delivery and Assurance Report** included the confirmed Q3 2024/25 position. The Board will receive the assurance report at its January meeting. Members discussed the risk in regular meetings with Health Boards (HBs) via the Commissioner being paused in recent months due to the establishment of the new Joint Commissioning Committee (JCC). There is a commitment to re-establish these meetings next year, potentially at a regional level rather than at the HB level, which could be beneficial. Assurance on broader engagement is provided through the Strategic Planning & Performance and Senior Operations, Clinical, and Quality teams, who are linked to HBs and attend regular meetings. This ensures that we remain connected to planning at the HB level in the absence of the paused meetings.

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

12. There were no **escalations** from the workstreams of achieving efficiency or income generation in the **financial sustainability programme** (FSP). Competing priorities with the CMT work have resulted in



slowed progress since the last reporting period, however as of M8 FY2024/25, there is a total overperformance of £446,000 (£5.086m) against the established planned M8 position (YTD) of £4.640m. Key areas of current focus for the FSP include:

*Achieving Efficiency:*

- Service and provision reviews, which will be further reviewed at a workshop on 11<sup>th</sup> February with senior leaders. The session aims to balance maintaining business as usual, focusing on IMTP strategic priorities, and exploring new possibilities. The outcome will be a smart program of activity and action plan, detailing next steps, priorities, additional resources needed, and alignment with IMTP priorities
- Short and long-term efficiency savings
- Process efficiencies

*Income Generation:*

- Scope and deliver 'small win' schemes
- Dedicated structures for delivery and oversight of commercial opportunities
- Commercial and financial mindset training and development.

13. The Head of Commercial advert closed on 13<sup>th</sup> January with 13 applications received - these are now in the process of being shortlisted. Members discussed the current scope of the **commercial programme**, which includes income generation opportunities, business development, and maximising existing profit-generating activities. There will be an oversight group ensuring the Head of Commercial will have the necessary backing and guidance within the organisation. The committee briefly explored the future strategic intent of financial sustainability and welcomed the opportunity for further deliberation on future focus and alignment with WASTs strategic objectives.

14. The **Digital KPIs** relating to data and analytics, ICT systems, digital services, projects & programmes, and progress against the recently refreshed Digital Plan were presented. Of note:

- The CMT requires 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 come to the March meeting.
- Noting the alert to board in the November AAA, the committee were assured that recruitment into the new Digital posts following additional investment this year is progressing well.
- The procurement exercise for the drones project has concluded with an anticipated operational go-live by end of March 2025.
- The NHS Wales 111 website still receives good use, however engagement rates have seen a decreasing trend. Enhancements to the website are 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.
- 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.
- High volume of records requests continues. Two new records officers joined in December and whilst compliance to target remains at risk, the improvement plan was recently refreshed with



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internal monitoring.

- Good system availability performance was reported, with performance still above the UK industry standard of 99.9%.
- The emergency services network outline business case is expected by the end of April, with a separate deep dive session to be planned.

15. The **Information Governance Report** (IG) for Q3 highlighting ongoing efforts to enhance information governance and data protection within the Trust, addressing both compliance requirements and operational challenges. Of note for the board:

- 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.
- Improvement actions on the IG toolkit were achieved on target with the team working on the March toolkit submission.
- IG Training compliance rate was at 78% in November, which exceeds the previous year's 75% target, however the new target is 85%, and that is required to be met by March as part of the IG toolkit.
- Members reviewed corporate risk 623 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 relates to research.
- Freedom of Information Act (FOI) requests increased from 43% in July to 72% in August and 64% in September, however this remains 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.

16. The **Environmental, Decarbonisation and Sustainability Update** reported as follows, with no escalations to the board:

- The majority of the red rated actions on the Trust's Decarbonisation Action Plan (DAP) require further investment or are dependent on external factors.
- The DAP risk 542 remains at a score of 16 and is regularly reviewed.
- The most recent Decarbonisation Co-ordination Reporting (DCR) to NHS Wales Shared Services Partnership in October 2024 maintains an overall Amber status.
- Various schemes are 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.
- 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.
- In line with WAST'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 is being done to address operational practices, charging processes, and vehicle locations.
- The overall aim of the DAP is to reduce emissions in line with our contribution to Welsh Government being at net zero by 2030. For WAST that equates 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.

- The organisation has more staff, facilities, and vehicles than in 2018, impacting emissions.

17. The Annual **Fire Safety Compliance Report** for the Trust's estate was received, focusing 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 are no escalations to the board, however of note:

- All emergency lighting systems have been serviced and maintained, ensuring full compliance with statutory obligations. However, monthly 'flick' tests are not being carried out at all ambulance stations.
- Bi-annual servicing and maintenance of fire alarm systems are being completed across all WAST-owned sites. Weekly fire alarm testing is being conducted at larger corporate and contact centre sites.
- All WAST 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.
- Annual fire drills have been added to the 3i Studio CAFM system, with Estates managing the annual program for fire drills across all Trust sites.
- There has been a significant increase in the number of trained fire marshals across the Trust estate.

18. Members received the **Committee Cycle of Business Monitoring Report and Committee Priorities** update with no escalations for the board.

19. In **closed session** members received the Fleet Procurement Strategy and an update on the cyber KPIs.

## RISKS

### Risks Discussed:

#### Board Assurance Framework Risks:

Members received assurance on the risks within the Committee's remit as well as the Trust's two highest scoring risks within QuEST's remit for oversight, noting that the data is the same as that presented to Trust Board in November 2025 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 is **Risk 641** related to the Manchester Arena Inquiry with a score of 20. Members noted that a significant number of Inquiry recommendations have been implemented without additional investment, which has allowed for a reduction in the initial risk score. The remaining recommendations require external support and financial investment to be fully implemented. The scale of the investment is



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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 is being progressed through usual risk management cycles.

The annual fire safety report noted several actions arising from fire risk assessments. These risks are 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.

**COMMITTEE AGENDA FOR MEETING**

Operations Update Q2	Financial position Months 8 & 9 2024/25	Financial Sustainability Report
IMTP Delivery/Assurance – Progress Update 2024-27 IMTP 2025-28	Monthly Integrated Quality and Performance Report	Digital reporting Internal audit – 111 Digital Operations
Information Governance	Environment, Decarbonisation and Sustainability Update	Fire safety annual report
Risk management and board assurance framework	Committee Priorities and Cycle Monitoring Report	Reflections

**COMMITTEE ATTENDANCE**

Name	14 MAY 2024	16 JULY 2024	17 SEPT 2024	19 NOV 2024	16 JAN 2025	18 MAR 2025
Joga Singh (Chair)						
Jayne Beeslee (Chair)						
Kevin Davies		Chair				
Bethan Evans						
Peter Curran			Chair			
Chris Turley						
Rachel Marsh	Hugh Bennett	Hugh Bennett	Hugh Bennett	Hugh Bennett		
Lee Brooks						
Liam Williams				From Item 7	Penny Durrant	
Angie Lewis						
Carl Kneeshaw						
Jonny Sammut						
Trish Mills	Julie Boalch					
Hugh Parry						
Damon Turner						

	Attended
	Deputy attended
	Apologies received
	No longer member