

## **CONFIRMED MINUTES OF THE MEETING OF THE FINANCE AND PERFORMANCE COMMITTEE (OPEN SESSION) HELD ON 17 JULY 2023 VIA TEAMS**

**Meeting started at 09:30**

### **PRESENT:**

Kevin Davies	Non-Executive Director (Chaired meeting)
Bethan Evans	Non-Executive Director
Martin Turner	Non-Executive Director (Left meeting after item 49/23)

### **IN ATTENDANCE:**

Hugh Bennett	Assistant Director, Commissioning and Performance
Lee Brooks	Executive Director of Operations (Item 50/23 only)
Judith Bryce	Assistant Director of Operations
Jason Fernard	Service Manager Emergency Preparedness Resilience, and Response (EPPR) (Item 50/23 only)
Ross Hughes	Internal Audit
Fflur Jones	Audit Wales
Navin Kalia	Deputy Director of Finance and Corporate Resources
Jason Killens	Chief Executive Officer
Angela Lewis	Director of People and Culture
Trish Mills	Board Secretary
Steve Owen	Corporate Governance Officer
Hugh Parry	Trade Union Partner
Marinela Stoicheri	Risk Officer
Lisa Trounce	Business Manager, Corporate Services
Damon Turner	Trade Union Partner

### **APOLOGIES:**

Rachel Marsh	Executive Director of Strategy and Planning
Joga Singh	Non-Executive Director and Chair of Committee
Leanne Smith	Interim Director of Digital Services
Chris Turley	Executive Director of Finance and Corporate Resources

## **44/23 PROCEDURAL MATTERS**

The Chair welcomed all to the meeting and reminded attendees that the meeting was being audio recorded. Members noted that any declarations of interest were contained within the Trust's declarations of interest register. Professor Kevin Davies added that he was no longer a Trustee of St John and it was noted the register would be updated accordingly. Apologies were received from Lee Brooks, Rachel Marsh, Joga Singh, Leanne Smith and Chris Turley

### **Minutes**

The minutes of the open session held on 15 May 2023 were considered by the Committee and confirmed as a correct record.

### **Action Log**

The Action log was considered and the following actions were recorded as follows:

Action 20/23a - Deep dive on 111 clinical call back times - To be included in MIQPR, further update at next meeting.

Action 28/33 - Update on actions following the Manchester Arena Inquiry – Action Closed.

Action 33/23 - Annual Review of Key Metrics, Circulate to Committee seeking comments in readiness for next meeting. Action Closed.

Action 38/23 - Provide Comms Team with information on the electronic Patient Care Record (ePCR) for circulation to staff. Action closed.

**RESOLVED: The minutes of the meeting held on 15 May 2023 were confirmed as a correct record and the action log was considered and updated as described.**

## **45/23 OPERATIONS QUARTERLY REPORT**

Judith Bryce presented the Operations Directorate update for quarter one and drew attention to the following key points:

An update on the recommendations as a result of Manchester Arena Inquiry was given; the Trust was currently progressing 71 of the 149 recommendations within volume 2 of the report as these were relevant to WAST.

The extended time it took to transfer the care of patients at hospital emergency departments continued to be of concern. The Trust was focussing on several areas to minimise these delays.

In terms of the Emergency Medical Technician (EMT) role, the Committee were updated on the work to develop the EMT3 role.

Comments:

The Committee sought clarity on the terminology 'licensed for systematic care'. Judith Bryce explained this referred to the risk arrangements with the roles undertaken by the Trust which was predominantly pre-hospital care on hospital premises.

Members were keen to understand details of recruitment and retention within the EMS coordination team; and the percentage of vacancies the Trust was carrying. Judith Bryce agreed to feedback the details at the next meeting whilst acknowledging there was a reasonably high attrition rate. Notwithstanding this, performance across the control room was high.

The Committee expressed their concerns with the high number of outstanding coroner statements; noting that work was ongoing to address this. Liam Williams assured the Committee that work was ongoing to address this and provided further details. This included a request for additional resource.

Members queried whether it was feasible to have more than one patient in an ambulance (cohorting) and therefore freeing up the other ambulance to attend 999 calls. Judith Bryce explained that the practice did exist and it was often the case that crews would care for more than one patient, however it was not necessarily advocated by the Trust. Liam Williams explained further how this worked and stressed it was the exception as opposed to the norm; adding there were additional risks and responsibilities with caring for the patient. The challenge for the Trust was to ensure that crews were comfortable with this approach and that the safety of the patients were uppermost.

The Chair reiterated the fact that an ambulance was a temporary clinical environment and had stressed this at a recent Vice Chair's meeting.

Hugh Parry explained that cohorting had been tried and tested for several years and quite simply was not very effective.

**RESOLVED: That the Committee noted the report.**

## **46/23 FINANCIAL POSITION MONTH 3, 2023/24**

The Committee received an update from Navin Kalia on the financial position for Month three, 2023/24, and an update from Angela Lewis on the Financial Savings Programme (FSP) Key highlights from the report included:

- a) The cumulative year to date (M3) revenue financial position reported was a small overspend against budget of £0.033m.
- b) The Capital plan was being progressed and planned expenditure of £32m was forecast to be fully spent by the end of the financial year.
- c) Funding for the £6m 100 front-line Whole Time Equivalents (WTE) was still assumed with correspondence continuing with the Emergency Ambulance Services Committee (EASC).

- d) An overview of the financial performance by each Directorate was provided and it demonstrated that the majority of Directorates were performing broadly in line with the current budget plan.
- e) Savings to date had overachieved by £93k.
- f) The overall financial risks were illustrated and these included the challenging savings targets for the 2023/24 financial year and the continuing increased costs in services due to inflation increases.
- g) Details of capital expenditure were given. The Trust has, at month three, spent £0.387m against the current all Wales capital scheme budget of £27.863m, and £1.332m against the discretionary budget of £4.321m.
- h) Members were updated on the timelines for submission of the Trust's Annual Accounts and Annual report. These were due approval at the Board on 27 July 2023; an unqualified audit opinion was expected in respect of the Accounts.
- i) In terms of the Financial Savings Programme, Angela Lewis advised the Committee that the Support Services Review (administrative/Corporate type roles) was almost complete with a first draft of the report due for Executive sign off on 24 July 2023.
- j) The report would consider high level themes focussing on, amongst others, consistency across ways of working and culminating in recommendations around cost saving/spend avoidance.
- k) In respect of recruitment, members noted that the Recruitment Control Panel had met on 20 occasions and that 145 posts had been approved; this information was correct as at 30 June 2023.
- l) The Operations Financial Savings Group had identified £2m in savings; partly related to overtime which helped the Trust to fully identify its savings plan.
- m) Income generation group work continued and was progressing well, with several savings schemes being identified. The group continues work to generate additional income through innovative ideas.

#### Comments:

The Committee expressed concern around the assumption against agreed salary increases will be fully funded by Welsh Government (WG). Navin Kalia explained that WG had provided assurances as per previous financial years that WG would fully fund all pay rises for this financial. However, going forward for future financial years, it could be an issue.

The Committee recorded a note of thanks to everyone involved in achieving the position at the end of month 3 which was not without its significant challenges.

Members noted that from the point of risk this required a significant cultural shift in terms of how resources were viewed in the Trust which was emphasised by Angela Lewis. In respect of the risk around income generation, it was asked what the Trust's level of confidence was in terms of achieving its goal, and also its ability to attain the significant level of savings required. Navin Kalia assured the Committee the Trust should deliver on the £1m target in respect of income generation which will however fluctuate throughout the year. As far as achieving the savings needed, both Navin and Angela explained this was delicately balanced and were reasonably confident for this financial year; however, the future financial years would prove to be more challenging. The risk around this will continue to increase unless the Trust takes proactive action to identify recurrent sustainable savings, which it was doing.

The Committee were comfortable that the Trust would balance financially at the end of 2023/24, noting there was some reliance on no-recurring savings this year. Angela Lewis explained that the Trust shared its concerns and ideas reciprocally with Health Boards on the state of finances across the NHS. Liam Williams added that the Trust continued to increase its visibility particularly across all of the six goals. He further added that the Trust's clinical transformation model gave exposure to greater financial efficiency across Wales; and should the clinical strategy be implemented in full this would reduce overall conveyance numbers and subsequently offer a wider NHS benefit. Additionally, savings could also be made through digital means, such as providing remote consultation and assessment.

**RESOLVED: The Committee:**

- (1) Noted and gained assurance in relation to the Month 3 revenue financial position and performance of the Trust as at 30 June 2023 along with current risks and mitigation plans;**
- (2) Noted the delivery of the 2023/24 savings plan as at Month 3, and the context of this within the overall financial position of the Trust;**
- (3) Noted a detailed paper on the financial position will be presented to Trust Board at the 27 July meeting; and**
- (4) Noted the audited accounts when approved by the Trust Board on 27 July will be submitted to Welsh Government by Audit Wales on 31 July 2023.**

**47/23 RISK MANAGEMENT AND CORPORATE RISK REGISTER**

Trish Mills presented the revised report which contained details of the risks relevant to the Committee's remit with additional rationale relating to any movement in risk scores.

All of the nine the risks under the Committee's remit had been reviewed in July 2023 apart from Risks 100 and 283, which were due for review in August 2023. Details of any movement in scores was given. One of the risks- Risk 424 (Prioritisation or Availability of

Resources to Deliver the Trust's Integrated Medium Term Plan); which had had increased from a score of 12 to 16.

In respect of risks 260 (A significant and sustained cyber-attack on WAST, NHS Wales and interdependent networks resulting in denial of service and loss of critical systems) and 543 (Major disruptive incident resulting in a loss of critical IT systems), whilst the majority of mitigation actions had been completed, there were still further reviews to be undertaken to identify any more mitigations.

Risk 245 (Failure to have sufficient capacity at an alternative site for EMS Clinical Contact Centres (CCCs) which could cause a breach of Statutory Business Continuity regulations) having reached its target, has been closed.

Comments:

Members recognised that the report had clearly illustrated dynamic evaluation of risks particularly for this year being set against the financial challenge.

**RESOLVED: The Committee accepted the status of the nine corporate risks which it has been assigned to oversee the management of. The Committee received the relevant sections of the Board Assurance Framework and noted the ongoing mitigating controls.**

#### **48/23 INTEGRATED MEDIUM TERM PLAN (IMTP) 2023/24 QUARTER ONE UPDATE FOR 2023/24**

Hugh Bennett presented the report and drew out the following key points for the Committee's attention:

- a) Following Trust Board approval on 30 March 2023, the Trust's IMTP for 2023-26 was submitted to Welsh Government on 31 March 2023. The Trust was currently awaiting formal feedback and approval, including any accountability conditions.
- b) The 150 actions within the IMTP were constantly being addressed to be streamlined and to avoid duplication and were being grouped into work packages.
- c) The Committee were updated on the IMTP delivery programmes for 23/24 which included EMS Operations programme and the Ambulance care programme.
- d) In addition to reviewing the IMTP assurance arrangements, the Trust has been developing project management guidance for all staff which aims to provide a practical guide to implementing business change.
- e) Members noted that in determining the justification of funding for projects and programmes, a revenue business case process had been developed which will scope out projects and, in some instances, develop full business cases.

- f) Work was also focussing on developing the lessons learned from projects and programmes.
- g) In terms of the Ambulance Care Programme, the Committee noted that the Trust was not proceeding with the roster review in respect of re-prioritising the existing capacity.
- h) A service review on financial sustainability was due to be undertaken, however there was an issue in earmarking a resource to conduct this.
- i) The Committee were updated on progress in terms of inverting the triangle and this included change management training and EMS demand and capacity review.

Comments:

Trish Mills commented that the Datix risk module, which was not in the Trust's control in any event, has been removed from the risk transformation programme and therefore will no longer be an issue.

Following a query on staff attrition, Angela Lewis informed the Committee there was a steady decline in staff turnover rates; which was really positive.

**RESOLVED: The Committee:**

**(1) Noted the update against WAST's IMTP delivery governance and assurance mechanisms; and**

**Noted the approach to project delivery and Post Implementation Review set out in this paper.**

## **49/23 MONTHLY INTEGRATED QUALITY PERFORMANCE REPORT**

Hugh Bennett presented the report which covered the month of May 2023 informing the Committee there had been a slight easing of pressure, although the operating positing remains extremely challenging.

In terms of key points from the report, the Committee were updated on the following:

- a) 999 answering times have been on target for the last five months.
- b) 111 call answering was improving with the call abandonment rate of 5% almost achieved in May with 42% of calls being answered within 60 seconds; whilst this remained off target, work was underway to improve this by recruiting more call handlers.

- c) In respect of 111 clinical response, the clinical call back time for the highest priority continued to be on target, while lesser priority calls remained slightly below the performance target.
- d) The Red 8-minute response target for ambulance response was at 54% and whilst this showed an improvement when compared to April 2023, however, further improvement was still required.
- e) With regards to recruitment, confirmation had been received that no-recurrent funding in 2023/24 will be available to support the 100 Whole Time Equivalent (WTE) staff recruited in 2022/23.
- f) In terms of the Clinical Support Desk (CSD), the Trust managed to increase its consult and close rate to 14.1%, with the ambition to reach 17% going forward.
- g) Recruitment for the Cymru High Acuity Response Unit (CHARU) continues with alacrity, the aim being to have 153 Whole Time Equivalents (WTE) in post in the near future.
- h) There were over 20k lost hours due to handover delays which was a decrease compared to the 23k lost in April 2023. Whilst this has led to improved quality and performance for EMS, Amber 1 performance with waits of over four hours remained unacceptable and the levels of lost hours to handover delays remained so extreme that all the actions within the Trust's control cannot mitigate and offset this level of loss.
- i) Overall, Ambulance Care (formally known as Non-Emergency Patient Transfer Service) performance continued to be stable, notwithstanding that general demand for this service continued to increase.

#### Comments:

The Committee recognised that the vast number of hours lost due to handover delays and the associated risks continued to weigh heavily, also noting that the Trust persisted in its efforts to mitigate this loss.

Liam Williams updated the Committee on the commitment of the Executive Teams from other Trusts to tackle the lost hours problem; noting that whilst improvements have started to be seen in other Health Boards, the Cardiff and Vale University Health Board area has shown a marked improvement.

Members held a discussion which reflected on the number of immediate release directives being declined; recognising that the significant number of Amber ones would result in patient harm.

The Committee noted the positive aspects of the report which included improvements in 111 call out and also the Return of Spontaneous Circulation rates at 20% had achieved the highest on record.



## **Existing and proposed Metrics for 2023/24**

Hugh Bennett gave an overview of the existing and proposed metrics for 2023/24 which were being presented to the Committee for Board approval on 27 July 2023.

The Committee were fully supportive of the metrics and queried what was going to be measured in terms of the Duty of Candour. Liam Williams advised that work was ongoing on a national basis to determine what the consistent measures were likely to be. In the meantime, the Trust will be illustrating the number of events and those responded to in relation to the Duty of Candour.

Following a query in relation to how the Board and Committees receive information and level of assurance relevant to them; Hugh Bennett advised that going forward it was the intention for the Board and Committees to receive one integrated report.

**RESOLVED: The Committee considered the May 2023 Integrated Quality and Performance Report and actions being taken and determined that:**

**(1) It provided sufficient assurance; and**

**(2) Agreed the new metrics for 2023/24 for onward approval at Trust Board.**

## **50/23 EMERGENCY PREPAREDNESS, RESILIENCE, AND RESPONSE (EPPR) ANNUAL REPORTING**

The Committee received a report and a presentation on the Emergency Preparedness, Resilience and Response (EPPR) which illustrated several areas and arrangements in place for their assurance.

The update included a review of the Civil Contingencies in Wales in which the Trust had been liaising with partners including Welsh Government to consider the future of Civil Contingencies in Wales.

Members were advised on the key areas of work being undertaken by the Trust's EPPR Team during 2023/24 and this included: Response to the Manchester Arena Inquiry (MAI), the Trust's Incident Response Plan, the review of Civil Contingencies in Wales, the UK Government Resilience Framework, the Welsh Government Annual Emergency Planning Report and the Annual Hazardous Area Response Team (HART)/Specialist Operations Response Team (SORT) Key Performance Indicators (KPI) report.

The Committee noted that the Trust's response to the 149 recommendations following the MAI, of which 71 were applicable to the Trust and work continued to monitor, review and address these. Members recognised that some of the recommendations would be closed off later as part of the Incident Response Plan (IRP) review.

In terms of the IRP this remained the Trust's overarching plan to determine its response to an incident. The IRP had been updated to include lessons learnt from several incidents and exercises. The IPR was due for review in October 2023 and will include the new Joint Operating Procedures to respond to Marauding Terrorist Attacks.

Members were updated on Risk 594 (the Trust's inability to provide a civil contingency response in the event of a major incident and maintain business continuity causing patient harm and death). As part of the mitigation of this risk the Trust was liaising with Welsh Government, who continue to provide support.

The Committee were advised that since the transfer of Powers in 2018 a first review of the Civil Contingencies within Wales had recently been completed. There were 15 recommendations within the report which the Trust continued to address going forward; the review confirmed that governance arrangements in place were fit for purpose.

Another key piece of legislation impacting on resilience was the UK Government Resilience Framework which sets out how the UK will strengthen collective resilience. It focused on how the UK will anticipate, assess, prevent, mitigate, and respond to civil contingency risks, known or unknown.

The Committee were updated on new Business Continuity (BC) plans being implemented to include plans on Information and Communication Technology (ICT) disruption and power outage.

The Welsh Government Annual Emergency Planning Report reports on the Trust's compliance and readiness to meet its obligations under the Civil Contingencies Act 2004. This included assurance that:

- Emergency plans were in place for the Trust to respond effectively to incidents of different types.
- Plans were reviewed and updated to reflect lessons identified internally and by external organisations.
- Training and exercises were carried out alongside partners, including seven tabletop exercise and over 20 multiagency counter terrorism tabletop exercises over the previous year, and participation in 12 multiagency live exercises over the previous three years.
- Processes were in place to train our commanders and refresher training has been provided at all levels of command.

The HART/SORT KPI report illustrated to the Committee an overview of the key activities these specialist teams had provided over the previous year. The Committee noted that whilst demand for HART had fallen during the pandemic, the number of deployments was now at pre-pandemic levels. In terms of the Enhanced SORT Business case, the Committee noted this had been resubmitted to Welsh Government at their request and the Trust was currently awaiting approval.

Comments:

It was questioned whether the Exercises conducted by the Trust had sufficient complexity. Judith Bryce commented that the exercises were fairly consistent with current events/incidents adding that the training scenarios were detailed and complex. However, there was always the need to adapt and be familiar to developing scenarios going forward. Jason Fernard provided the Committee with details of the Trust's involvement in Exercise Dollhouse, a multi-agency exercise which focused on a scenario involving a terrorist attack at a music event. Lee Brooks added that exercises of this nature were invaluable to the Trust's learning.

**RESOLVED: That the Committee:**

- (1) Received and discussed the annual report with a view to offering its confirmed assurance of the Trust's work in this area and to onward report to the Trust Board; and**
- (2) Received the Manchester Arena Inquiry Volume 2: Emergency Response report, the End of year summary report for 2022/23, the Health Emergency Planning Annual Report for 2022 and the UK Government Resilience Framework report.**

**51/23 INTERNAL AUDIT TRACKER REPORT AND INTERNAL AUDIT REPORTS**

Trish Mills advised the Committee that the Audit Tracker was undergoing a revision and a recommendation on a revised process and format will be presented at the Audit Committee in September. Members noted that the Corporate Governance Team will liaise with both Internal Audit and Audit Wales on the production of the revised report.

In terms of the Tracker, there were 86 internal audit recommendations assigned to the Committee for oversight, with 33 having not met their agreed and revised completion dates.

There were 11 recommendations with no update, four were due in April, four were due in May and three in June. The Committee were assured that by the next meeting a more comprehensive update would be provided.

Advice had been sought from the Head of Internal Audit regarding historic recommendations resulting in a number of these being marked as closed rather than complete particularly where further reviews were due to take place and where actions have been subsumed into detailed work plans or superseded.

The Committee reviewed two internal audit reports, the Information Management & Technology (IM&T) Infrastructure which received a reasonable assurance, the objective being to provide assurance on the management and operation of the Trust's IM&T. The other report, the Savings and Efficiency report also receiving a reasonable assurance, looked at last year's financial year. The report noted the introduction of the Financial Sustainability Programme for the challenging year of 2023/24. A recommendation from

the report highlighted the requirement for this Committee to clearly demonstrate its scrutiny of the savings programme.

Comments:

The Committee welcomed that the tracker was being reviewed particularly around the timing of closures.

**RESOLVED: The Committee noted the update and acknowledged receipt of the Savings and efficiency Internal Audit review and the Information Management and Technology Infrastructure Internal Audit review.**

## **52/23 TRUST POLICY REPORT**

The Committee were updated on the status of Trust policies by Trish Mills.

Members noted that a number of policies had not been reviewed within the expected review date; and these levels had fallen during the Covid-19 pandemic where work on policies had been paused. This has resulted in a great deal of policies going beyond their review date.

A prioritisation exercise has taken place based on a risk assessment, and a revised governance process for policies and delegations for approvals was underway. Whilst only 14% of policies (13 of 93) were currently within their review date, the Committee noted that policies do not 'expire' and that extant but overdue for review policies have undergone rigorous review prior to their approval; as a result, these policies would be acceptable with minor amendments. The Audit Committee will monitor progress of improvement plans and will review the revised governance arrangements.

The Trust's policy governance process was being refreshed in partnership with Trade Union colleagues and included the review of the Policy on Policies and the process for other documents such as Standard Operating Procedures. It was expected that proposals will be submitted to the Executive Management Team (EMT) for endorsement in late August 2023, and a report submitted to Audit Committee and Trust Board in December 2023 for approval.

Comments

Members questioned whether the policies were Trust only policies or whether they included Welsh NHS policies. Trish Mills advised that the 93 referred to were Trust only. Additionally, there were 19 all Wales NHS policies, and only one was within its review date.

Members held a discussion in which they recognised the importance of reviewing policies in partnership with Trade Union colleagues.

It was questioned what the level of risk was in terms of reputational risk with regards to having a high number of policies awaiting review. Trish Mills added that the risk must be tempered with those influencing factors such as Covid-19, Industrial Action, and Winter

pressures. She added that the policies were being reviewed in order of those that posed the highest risk.

Damon Turner added that from a trade union perspective and as an employee there was a robust governance structure in place for the review and monitoring of policies.

The Committee recognised the challenges involved with the effective use of capability and capacity when reviewing the policies against the backdrop of other priorities.

**RESOLVED: The Committee considered the contents of the report and the programme of work in development to mitigate risk and bring policies in line with appropriate review dates.**

**53/23 MAY COMMITTEE AAA REPORT**

The report was noted.

**RESOLVED: The Committee noted the report.**

**54/23 CYCLE OF BUSINESS MONITORING REPORT AND REVIEW OF COMMITTEE PRIORITIES**

The report was noted.

**RESOLVED: The Committee noted the report.**

**REFLECTION: SUMMARY OF DECISIONS AND ACTIONS**

It was agreed that any reflections would be e mailed to chair after meeting and he would liaise with Trish Mills on any actions and/or decisions.

**RESOLVED: Noted as above.**

**Meeting concluded at 12:24**

**Date of Next Meeting: 18 September 2023**