

## **CONFIRMED MINUTES OF THE MEETING OF THE FINANCE AND PERFORMANCE COMMITTEE (OPEN SESSION) HELD ON 18 SEPTEMBER 2023 VIA TEAMS**

**Meeting started at 09:30**

### **PRESENT:**

Joga Singh	Non-Executive Director and Chair of Committee
Professor Kevin Davies	Vice Chair of the Board and Non-Executive Director
Bethan Evans	Non-Executive Director
Martin Turner	Non-Executive Director (Left meeting after item (62/23))

### **IN ATTENDANCE:**

Julie Boalch	Head of Risk/Deputy Board Secretary
Judith Bryce	Assistant Director of Operations
Fflur Jones	Audit Wales
Navin Kalia	Deputy Director of Finance and Corporate Resources
Angela Lewis	Director of People and Culture
Osian Lloyd	Head of Internal Audit
Rachel Marsh	Executive Director of Strategy and Planning
Trish Mills	Board Secretary
Steve Owen	Corporate Governance Officer
Hugh Parry	Trade Union Partner
Alex Payne	Corporate Governance Manager
Damon Turner	Trade Union Partner
Chris Turley	Executive Director of Finance and Corporate Resources
Aled Williams	Head of Information Communication and Technology
Keith Williams	Emergency Services Mobile Communications Programme Manager (Item 63 only)
Liam Williams	Executive Director of Quality and Nursing
Joanne Williams	Head of Capital Development (Item 64/23 only)

### **APOLOGIES:**

Lee Brooks	Executive Director of Operations
Leanne Smith	Interim Director of Digital Services

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.

### **Minutes**

The minutes of the open session held on 17 July 2023 were considered by the Committee and confirmed as a correct record subject to amending the title of Jason Fernard to Service Manager Emergency Preparedness Resilience and Response (EPRR).

### **Action Log**

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

Action Number: 20/23a - Deep dive on 111 clinical call back times - To be included in the Monthly Integrated Quality Performance Report (MIQPR). Rachel Marsh advised that it was not included in today's update and suggested it be discussed when the MIQPR was presented later in the meeting.

### **Committee Highlight Report – 17 July 2023**

The committee highlight report from the 17 July 2023 Committee meeting was presented for the Committee's attention.

Following a request to receive an update on the position with Trust policies, Trish Mills advised following a robust review, it was being monitored through the Audit Committee.

### **RESOLVED:**

- (1) The minutes of the meeting held on 17 July 2023 were confirmed as a correct record, subject to amending the job title of Jason Fernard to Service Manager EPRR:**
- (2) the action log was considered and updated as described; and**
- (3) the committee highlight report was presented for information.**

## **56/23 OPERATIONS QUARTERLY REPORT – QUARTER TWO - JULY TO SEPTEMBER 2023**

Judith Bryce presented the Operations Directorate update for quarter two in which the Committee were updated as follows:

Members were assured that satisfactory progress was being made against the 71 actions applicable to the Trust resulting from the Manchester arena Inquiry.

The Committee noted that Exercise Dollhouse which was undertaken in July with representatives from across the Trust participating, had illustrated that WAST Commanders have a robust understanding of the need to deploy front line staff quickly but safely in the event of a Marauding Terrorist Attack.

A replacement Operations Manager has been recruited for the Volunteer Car Service (VCS) who, as part of their remit, will plan to increase the number of active VCS volunteers from 100 to more than 200 by the end of the year.

Further details on attrition rates in Emergency Medical Service (EMS) Coordination which was requested at the last meeting was provided. There were currently 19 vacancies in EMS Coordination and the Committee were assured that colleagues were doing their utmost to improve the situation.

As part of the financial savings plan EMS has controlled the level of overtime allocation. The reduced overtime allocation commenced on 1 July 2023 and the resultant Unit Hours Production (UHP) levels for the month of July were extremely close to the predicted levels, with abstraction variation across the 7 Health Board areas between 30% to 39%, with a Trust average of 35.62%.

#### Comments:

In terms of recruitment the Committee recognised there had been significant withdrawals from the recruitment process. Judith Bryce explained this could be for any number of reasons and it was not uncommon that people drop out mid-way through the process. The Trust was collecting the necessary data and from that will introduce measures to reduce the number of withdrawals.

The Committee sought clarity and an explanation on Unit Hours Production (UHP) levels and abstraction variation. Judith Bryce explained that UHP levels was the measure of the full roster of staff against what was deployed; if the roster was due to be staffed at 100% and only 50% deployed then that was a 50% UHP. UHP was measured in terms of percentages of the roster and what should be rostered daily. Abstraction levels was the amount of people unavailable to work due to several factors which varied on a daily basis across all Wales. On average the abstraction levels were 30 – 35 %.

Further explanation was sought on the area of reduced overtime allocation due to the Financial Savings Plan which resulted in reduced UHP. Judith Bryce informed Members that overtime controls were a way to contribute to the Financial Savings Programme, by controlling the amount of overtime in some areas.

Members recognised that staff turnover rates were a fundamental problem across all organisations and noted the ongoing work to improve this position.

The Committee were pleased to see the ongoing support to the Putting Things Right (PTR). Liam Williams provided an update on the approval for increase in the PTR establishment to ensure appropriate resourcing was in place to meet the demand.

**RESOLVED: That the Committee received the Operations Quarterly report for July to September 2023.**

**57/23 FINANCIAL POSITION MONTH 5, 2023/24**

The Committee received an update in the form of a presentation from Chris Turley on the financial position for Month five, 2023/24. The key points were:

The cumulative year to date revenue position was a small underspend of £0.027m, with the year-end forecast being one of break even.

Members were updated on the financial performance by each Directorate; noting that the Operations Directorate had reported an underspend of £748k, however reasons and assumptions behind this were also then presented.

An update was given on the current position in respect of the funding for the 100 Whole Time Equivalents (WTE); the sum of £5.7m. The latest correspondence has confirmed that the funding should be made available; however, clarity of the funding source was still to be progressed. The lack of clarity has meant that the organisation is taking a cautious and prudent approach to its financial management, in part resulting in the Ops Directorate position as above.

Members were also updated on the impact of the latest discussions with the Chief Ambulance Services Commissioner (CASC) in terms of expected funding.

There were several other risks which required management going forward which included; payment of the pay awards to be funded by Welsh Government (WG), the continuing volatility in the energy market, and the impact of any additional savings required.

The Capital plan was being progressed and current planned expenditure of £32m was forecast to be fully spent by the end of the financial year.

The Committee were shown examples of how future updates to the Committee would be given with the development of a financial reporting dashboard.

Comments:

The Committee found the update reassuring, nevertheless, would appreciate some understanding of the assessment of the service impact in meeting the financial target. Chris Turley advised that ongoing discussions with the CASC in terms of service impact continued. Rachel Marsh added that modelling of service impact has been shared with the CASC, one of them being the decrease in capacity because of reducing overtime which could possibly lead to a 5% reduction in red performance going forward.

The Committee registered their concern in respect of the impact and consequential effects on service delivery as a result of the delayed decision on confirmation of funding of the £5.7m, noting this would increase exponentially as the delay in confirmation increased.

Chris Turley agreed to update the Committee with any progress on confirmation of funding at the next meeting.

**RESOLVED: The Committee noted the financial position for month 5, 2023/24.**

## **58/23 FINANCIAL SUSTAINABILITY PROGRAMME REPORT**

An update on the Financial Sustainability Programme was provided by Angela Lewis, noting this would be a regular quarterly update going forward.

The governance of the programme had been reviewed, and members recognised there had been timely progress and were assured that schemes were being scoped and advanced, and that the programme was also aiming to embed a foundational understanding of financial management across the Trust upon which future financial sustainability can be achieved.

Angela Lewis added that the Trust, in terms of achieving efficiencies, was not just focusing on short term solutions as this will be a long-term issue.

Currently, updates were reported through the Strategic Transformation Board and also the Executive Leadership Team and Assistant Director Leadership Team.

One of the focus areas going forward was looking at and identifying particular income generation initiatives. At present the Trust was in receipt of 94 ideas and initiatives which it was considering in more detail.

Comments:

Members commented that on the governance group, it would be useful to have input from a Trade Union perspective, particularly on the income generation ideas which Angela Lewis had already considered.

**RESOLVED: The Committee, in order to provide an additional layer of scrutiny and assurance, approved that a progress update be provided to the Finance and Performance Committee on a quarterly basis.**

## **59/23 RISK MANAGEMENT AND CORPORATE RISK REGISTER**

Julie Boalch updated the Committee on the position of the eight principal risks assigned to it for monitoring and had been updated as at 1 September 2023.

Following review at the Executive Leadership Team (ELT) all the scores had remained static. The Committee were assured that the actions were appropriate, and all relevant risks had been reviewed. Members were assured of new actions that had added to mitigate risks.

Comments:

The Committee recognised that some of the risks have remained static for a prolonged period. Trish Mills added that these were the risks that did not alter quickly and would not expect a shift in month. Members were assured of the position given the Committee there was detailed discussion at high level where risks scores were challenged, particularly around the sickness absence. In terms of the higher rated risks, it had been previously agreed to report these to the Board with specific detail on where the mitigation of these risks were discussed.

Liam Williams added that the depth of review, particularly with the higher scoring ones was subject to a detailed review every month at ELT meetings.

Liam Williams explained the challenges involved in reviewing the risks, adding in all likelihood the two highest scoring risks would remain, from a quality perspective, at a score of 25 for the foreseeable future.

**RESOLVED: The Committee considered the contents of the Risk Management report.**

**60/23 INTEGRATED MEDIUM TERM PLAN (IMTP) 2023/24 QUARTER ONE UPDATE FOR 2023/24**

Rachel Marsh introduced the report announcing that the WAST Integrated Medium-Term Plan (IMTP) 2023-26 had now been approved by Welsh Government.

An update on progress against the plan was received as at the end of Q1. A series of charts within the report illustrated the total number of deliverables, where red or amber allocated a small narrative to explain why.

Two of the IMTP delivery programmes were marked as red and these were in respect of Salus and Advanced Practice; the latter being how advanced practice would be developed in the Trust. A lack of funding for recruiting for recruitment had been the issue.

The Committee were assured that the Strategic Transformation Board reviewed and monitored the deliverables against the IMTP 2023-2026

Comments:

The Committee acknowledged the work involved in having the IMTP 2023-2026 approved.

Members referred to page five of the report which mentioned how the Trust could explore income generation workstreams from a commercial mindset and asked if there had been any progress. Angela Lewis mentioned there had been discussions with value-based healthcare colleagues who have led the way in terms of some of this work in changing mindset and looking at continuous improvement modules. There was still further work to be undertaken and this was a key focus for the team.

**RESOLVED: The Committee noted the update against the Trust's IMTP delivery governance and assurance mechanisms.**

**61/23 MONTHLY INTEGRATED QUALITY PERFORMANCE REPORT**

The Monthly Integrated Quality and Performance Report (MIQPR) for August 2023 was presented by Rachel Marsh who drew the Committee's attention to the following points:

There was work ongoing to define some of the newer Key Performance Indicators (KPIs).

There had been good performance in 111 abandonment rates being lower than 5%, also on clinical response ring back times which were meeting targets; however, this may be affected by Winter pressures over the coming months.

Red response for August was at 50.4% and Amber 1 response at 1 hour 14mins. These were lower than ideal, meaning patients were waiting for longer in the community. Whilst Red response was very important for life threatening issues, most of the harm was in the Amber category.

Trust sickness absence: the Trust's overall sickness percentage was 8.23% in July 2023, a deterioration from the 7.51% recorded in June 2023. Actions within the IMTP concentrated on staff well-being with an aim to start to reduce this level to the target of 6%.

EMS abstraction levels increased to 34.89% in July 2023, and remained above the 30% benchmark. An initial deep dive meeting has been held, with further work planned.

It was noted that consult and close rates after 999 calls had fallen to around 13%, with the ambition being 17%. The Committee also noted the Clinical Support Desk action plan was in place with support being provided to that team.

Handover times had slightly increased in August at just over 19,000 hours despite levels set through the Emergency Ambulance Services Committee (EASC) of no more than 15,000 by the end of September, which were not on track to be achieved. Whilst improvements in certain areas were evident, on a national basis there continued to be challenges to achieve a reduction in handover. A workshop was due to be held in September to consider improving flow through Emergency Departments and WAST would participate in that.

National Reportable Incidents (NRIs) / Concerns Response: The Trust reported one NRI to the NHS Executive in August 2023, a decrease of three from the four reported in July 2023; and 23 serious patient safety incidents were referred to health boards under the Joint Investigation Framework, which has now been adopted NHS Wales wide. In July 2023 complaint response times increased to 49%, although still did not meet the 75% target with cases remaining complex.

Comments:

The Committee were keen to hear if any lessons had been learned from the Cardiff and Vale University Health Board in terms of handover delays which had shown improvement in that area. Rachel Marsh commented that other Health Boards had linked in with them to understand the actions they have been taking and see if that could be replicated. She

added that from a national perspective, Integrated Commissioning Action Plan meetings took place which focused on actions being taken across Wales to consider ways to improve the patient flow.

In terms of the Deep dive as referenced in the action log, Action Number: 20/23a - Deep dive on 111 clinical call back times, Rachel Marsh advised that the targets in terms of clinical ring back were being achieved, and as there were no major issues at this time. It was agreed that unless performance levels changed for the worse there was no requirement for a deep dive.

Members acknowledged the significant challenges going forward with red performance expressing their concern that moving into the Winter period, performance was likely to deteriorate further. Judith Bryce informed the Committee as at today red performance was 46.9%.

The Committee discussed the challenges being faced by the whole service and were updated by Liam Williams on the work being undertaken to improve hospital flow; echoing that the system must work together to apply as much pressure on Welsh Government to implement processes enabling quicker discharges from hospital.

Members discussed in detail the areas affecting performance which included demand, particularly where there have been spikes which has a massive effect on the Trist's capacity. Rachel Marsh added that management has focussed on sickness and abstraction levels and gave assurance there was significant scrutiny at ELT level and by the People and Culture Committee. Angie Lewis advised the Committee there has been improvement in sickness levels; adding this was being focused on constantly. As a comparison with other UK ambulance services the Trust was doing very well.

#### **RESOLVED: The Committee**

- (1) Considered the Monthly Integrated Quality Report, noting the update: and**
- (2) Agreed, unless performance levels changed for the worse, a deep dive was not required in respect of the Deep dive as referenced in the action log, Action Number: 20/23a - Deep dive on 111 clinical call back times,**

***Martin Turner left meeting at 11:40***

#### **62/23 DIGITAL STRATEGY PLAN**

Members recognised it was a priority of the Committee for 2023/24 to have oversight and monitoring of the digital strategy.

Aled Williams updated the Committee on the digital strategy plan which consisted of the following sections:

1. Data & Analytics status



2. ICT Systems status
3. Service provision and quality
4. Summary of IMTP contributions
5. A 'spotlight' item (where the deep dive topic will change each month)
6. People (this page of the report was currently in development).

Aled Williams gave further detail on each of the above sections and how the metrics were performing.

Since the publication of the Digital Strategy, the Trust has made excellent progress, with a number of large digital patient and digital workplace transformation programmes being completed in 2022-23 and others piloted and now progressing through 2023-24.

Comments:

The Committee reviewed progress on the plan and approved key digital system and service metrics to support monitoring of this area. Notwithstanding this excellent work, gaps in the plan have been identified as were vacancies in the team, and these will be progressed by the new Digital Director, Jonny Sammut, who joins the Trust on 27 September.

Members queried the number of vacancies and if there were any issues with recruitment. Aled Williams explained that within ICT there had, initially been an improvement in vacancy levels, however this had fallen to a vacancy level of 8.5. There were several factors involved affecting this and the Trust continued to work to improve the situation. The Committee accepted and acknowledged the challenges involved in the recruitment and retention of staff with technical experience in the digital environment.

Liam Williams added that the national digital portfolio and greater alignment across all solutions, included investment required scaling up. Information governance could be improved with better data sharing agreements that would enable organisations to work together quicker and effectively.

**RESOLVED: The Finance & Performance Committee considered the metrics report and agreed reporting in this form met the oversight & assurance requirements, with a frequency aligned to the Committee cycles (i.e., every 2 months).**

## **63/23 MOBILE DATA VEHICLE SOLUTION WELSH GOVERNMENT PROJECT ASSURANCE REVIEW**

Keith Williams presented the Committee with an update on the Mobile Data Vehicle Solution (MDVS) project. The MDVS project sought to replace the legacy Mobile Data Terminals (MDTs) which formed part of the WAST safety and critical communications infrastructure and was funded by a capital investment of £22.9m from Welsh Government.

A Welsh Government gateway review of the project was received with an overall delivery confidence assessment of Amber/Green, meaning successful delivery appeared highly

probable.

The review identified several recommendations for the Trust to consider and these included:

The project team should update all project documentation to ensure it was consistent and accurate.

The project team should undertake a round of stakeholder engagement/communications to ensure that everyone was aligned to the new project plan.

The project team was to update the risk register to include mitigating action and all residual risks.

The Senior responsible Officer should ensure constant monitoring of the key risks was undertaken. These related to availability of suitable estates and logistics support, the risk associated with the Road Traffic Act and how that would interact with the new technology, and the control room solution project in association with upgrading the communications technology in that environment; all of which have been addressed and delivered.

The project team was to complete the benefits matrix and ensure that benefit outcomes and measurements were identified. This was currently in progress.

Deployment of the project was scheduled to commence week commencing 23 October 2023 with an Operations review and benefits realization review scheduled 12 months post MDVS deployment.

The Committee sought clarity on the challenges with the project when the Trust was operating at Resources Escalation Action Plan (REAP) level four. Keith Williams explained that the Trust had been at REAP level four for a significant period during the later stages of 2022 and had managed to continue delivering the project against the system wide pressures on demand.

**RESOLVED: The Committee noted the update and the actions being taken in response to the recommendations made by the review team.**

## **64/23 ENVIRONMENT, DECARBONISATION AND SUSTAINABILITY UPDATE**

Jo Williams gave a presentation and drew Members' attention to the following key areas:

### **Decarbonisation Programme Board and other wider governance.**

The Board meets quarterly with the most recent meeting held on 21 August and oversees delivery of the actions within the Decarbonisation Action Plan (DAP).

### **WAST Decarbonisation Action Plan update.**

There were 144 actions in the DAP, with 17 of those requiring urgent attention.

## **NHS Wales Shared Services Partnership (NWSSP) Decarbonisation Co-ordination Reporting (DCR).**

The first (pilot) NWSSP DCR report was submitted in June 2023, this report covered only Transport and Procurement (TaP) initiatives progress for Q4 2023. The Trust has now received the updated reporting timeline, which was quarterly. All actions within the DAP will require an update each quarter. The first report required submission by 31 August 2023.

### **Welsh Government reporting (including 2022/23 Sustainability report).**

This was a mixture of qualitative and quantitative data sets reporting, with the Annual Sustainability report amalgamating those data sets. It was noted that whilst there had been a reported significant increase in the Trust's overall emissions, this was explained by changes in definitions and that which is now included when compared to the baselines. Such a movement will be the same for all NHS Wales organisations therefore The Trust was addressing this by moving to more newer and renewable energy technology.

### **Waste Management – internal audit, update report and legislation.**

New provisions under the Environment (WALES) Act 2016 will come into force on 1 April 2024 and this will provide for occupiers of non- domestic premises to comply with several legislative requirements. The impacts for the Trust include additional resources to implement and manage the requirements.

### **Reinforced Autoclaved Aerated Concrete (RAAC).**

The Committee was assured that, in line with other NHS Wales organisations, WAST had conducted a detailed independent inspection of all sites within scope, which detailed a nil return in relation to the presence of RAAC in all buildings up to 2000. In addition, further detail has been sought for buildings where WAST colleagues share estate with the Fire and Rescue Services.

Comments:

The Committee thanked the team for the report and acknowledged the complexity of the work involved.

### **RESOLVED: The Committee**

- (1) NOTED this update, specifically in relation to the DAP reporting and establishment of programme management arrangements;**
- (2) NOTED the quantitative carbon report;**
- (3) ENDORSED the 2022-23 Sustainability Report, for subsequent approval by Trust Board;**

- (4) **NOTED the DCR submission to NWSSP, approved for submission by the Executive Director of Finance & Corporate Resources;**
- (5) **NOTED annual waste reporting requirements, changes to waste policy & upcoming changes to waste legislation;**
- (6) **NOTED the outstanding internal audit recommendations and plans for their closure;**
- (7) **NOTED the Utility, Water & Waste report; and**
- (8) **NOTED the update and assurances provided in relation to RAAC.**

## **65/23 MANCHESTER ARENA INQUIRY – PROGRESS UPDATE**

Judith Bryce presented the report as read adding that good progress was being made against the 71 applicable actions for the Trust.

The completion of actions required a considerable amount of work and involved:

1. Fortnightly meetings with the Head of Service and Service Manager, Emergency Preparedness, Resilience and Response (EPRR) & Specialist Operations.
2. Monthly meetings with the Assistant Director of Operations, National Operations & Support / Head of Service, EPRR & Specialist Operations.
3. Bi-monthly meetings with the Executive Director of Operations / Assistant Director of Operations / Head of Service, EPRR & Specialist Operations.

Comments:

Given the national focus it was critical to get this right and the Committee wanted to understand if there were any nuances/challenges that were Welsh centric had been identified. Judith Bryce commented there were some differences with England and Wales but the Trust ultimately would look to look to maintain interoperability with England and report in a consistent way.

**RESOLVED: The Committee RECEIVED and DISCUSSED the governance and assurance process, and progress on the completed recommendations related to the MAI recommendations, noting that the Operations Senior Leadership Team had approved the recommendations included in the paper.**

## **66/23 CYCLE OF BUSINESS MONITORING REPORT AND REVIEW OF COMMITTEE PRIORITIES**

The report was noted for information.

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

**67/23 REFLECTION: SUMMARY OF DECISIONS AND ACTIONS**

Members reflected that there had been good focus on the impact of the financial challenges on our patients and our people; and the challenge of balancing volume of papers and presentation time is one that will have particular focus at effectiveness reviews this year. Several Items on the Agenda were broad and interesting, and it should be borne in mind when setting the agenda that items were in the right place and allocated sufficient time. There was still a challenge on the volume of papers and time management.

Interaction with presenters who do not normally attend the meeting could be improved. Members felt that this was not in any way to indicate a lack of respect and thanked those presenters for the clarity of their papers and messages, adding it was incumbent upon the Chair to thank report writers. Furthermore, a lack of time should not be an obstacle to the scrutiny of items.

It was agreed that any further reflections would be e mailed to the chair after the meeting and he would liaise with Trish Mills on any actions and/or decisions that required reporting to the Board through the AAA.

**RESOLVED: The reflections were noted as above.**

**68/23 ANY OTHER BUSINESS**

It was raised whether the 20mph restriction on certain areas on Welsh highways as imposed by Welsh Government, and the impact on WAST had been acknowledged. Rachel Marsh added that within the MIQPR job cycle times were checked from an EMS perspective.

Judith Bryce added that job cycles times were closely monitored, and any impacts would be addressed. Also, in terms of NEPTS, times were monitored closely to see if the same number of journeys were carried out in the allocated shift time. It was too early to see if any impact was being made.

**Meeting concluded at 13:02**

**Date of Next Meeting: 13 November 2023.**