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Welsh Ambulance Services
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WELSH AMBULANCE SERVICES NHS TRUST

MINUTES OF THE OPEN SESSION OF THE EXTRAORDINARY MEETING OF THE QUALITY, PATIENT EXPERIENCE AND SAFETY COMMITTEE HELD ON 13 JUNE 2025 VIA TEAMS

Meeting started at 09:30

PRESENT:

Bethan Evans	Non-Executive Director
Ceri Jackson	Non-Executive Director and Vice Chair of the Board
Rhiannon Beaumont-Wood	Non-Executive Director

IN ATTENDANCE:

Claire Appleton	Assistant Director of Putting Things Right
Kate Blackmore	Assistant Director of Quality Governance
Julie Boalch	Assistant Director of Corporate Governance and Risk
Jonathan Chippendale	Consultant Paramedic
Penny Durrant	Deputy Director of Nursing, Quality and Governance
Leanne Hawker	Head of Patient Experience & Community Involvement
Sarah Harland	Corporate Governance Officer
Jason Killens	Chief Executive Officer
Mark Marsden	Trade Union Partner
Rachel Marsh	Executive Director of Strategy, Planning and Performance
Steve Owen	Corporate Governance Officer
Hugh Parry	Trade Union Partner
Alex Payne	Corporate Governance Manager
Felicity Quance	Internal Audit
Andy Swinburn	Executive Director of Paramedicine
Liam Williams	Executive Director of Quality and Nursing

APOLOGIES:

Lee Brooks	Executive Director of Operations
Wendy Herbert	Deputy Director of Quality and Nursing
Trish Mills	Director of Corporate Governance/ Board Secretary
Jonny Sammut	Director of Digital Services

42/25 PROCEDURAL MATTERS

Declarations of Interest

There were no other declarations of interest to those already in the register of interests.

Apologies

Apologies were recorded from Lee Brooks, Wendy Herbert, Trish Mills and Jonny Sammut.

The Committee RESOLVED To:

- (1) Note there were no other declarations of interest other than those already on the register.**
- (2) Note the apologies recorded for Lee Brooks, Wendy Herbert, Trish Mills and Jonny Sammut**

43/25 DUTY OF QUALITY ANNUAL REPORT 2024/25

Liam Williams advised the committee that Kate Blackmore has led colleagues from across the Trust to create the report. The report has been reviewed by Executives individually and by the Executive Leadership Team and agreed upon at the Clinical Quality Governance Group. It was now presented for endorsement prior to submission for approval to the Trust Board for publication.

Kate Blackmore commented that following the publication of last year's first Duty of Quality Annual Report, feedback was sought from the NHS Executive Quality team and the Chair of the National Reference Group for the Duty of Quality. Both provided highly positive feedback on the initial report. The reference group reconvened to review all Duty of Quality annual reports across NHS Wales prior to generating this year's report. The team adhered to a similar format and incorporated guidance from the Communications Team regarding the accessibility of the report on the website. It was recommended that the Sway platform be used instead of publishing a PDF to better support accessibility tools. Consequently, the 2024/25 report appears slightly different from the 2023/24 report.

Kate added that the team used the Health and Care Quality Standard self-assessment to generate content against the twelve Health and Care Quality Standards for this year's report. Additionally, content from the Integrated Medium Term Plan (IMTP) was used to outline the Trust's intentions with a quality perspective for the next twelve months, providing a comprehensive report that included reflection, assessment, and forward-looking goals.

The Committee noted that whilst the Duty of Candour reporting will be incorporated into the Annual Putting Things Right Report for 2024/25, which will be published in October, the Duty of Quality report content was aligned with this activity as it helps the Trust hear the citizen's voice and produces opportunities to learn and drive improvement. The annual report has been produced using Sway to ensure the Trust meets its accessibility requirements when published on the website.

Ceri Jackson noted the challenges of making the report accessible to the public while meeting requirements. Feedback indicated reports were too long, often exceeding 50 pages. Kate Blackmore noted that initial drafts were shorter, but converting to Sway made them longer. She will continue efforts to keep reports as concise as possible while covering the full scope of quality duties.

Ceri Jackson added that the Trust's focus on digital and prioritisation, were fundamental to the Trust's work and priorities, particularly in collaboration with partners. As priorities were considered for the upcoming year, she asked how the Trust could ensure it was making informed and effective decisions concerning these areas. Liam Williams commented that the IMTP has a level of investment that has been made available for this financial year to strengthen the approach to data and digital.

Ceri Jackson raised another query regarding Equality, Diversity and Inclusion (EDI) which she considered to be an overarching theme but would appreciate any additional insights on this subject. Kate Blackmore added that the team had collaborated closely with the EDI team to identify key elements that would align with the Equitable standard. Over the next 12 months, the aim was to enhance accessibility by promoting resources more effectively, beyond just publishing them in committee papers.

Rhiannon Beaumont-Wood remarked on the importance of leveraging this report to foster a sense of pride among staff and enhance their contributions. This included discussions on data, clinical care bundles, and reporting. Additionally, she emphasised the need to collaborate with partners to improve accessibility.

Kate Blackmore explained that the Trust was preparing to launch the quality hub and introduce the Life QI tool, along with new software tools designed to enhance efficiency. From clinical compliance to bundle work, steps have been taken to reframe the electronic Patient Care Record (ePCR) for improved usability. The Duty of Quality page will feature a promotional piece to motivate staff to take assurance and pride in this significant journey.

Liam Williams added that the work completed to build the Clinical Model Transformation Programme has been carried out ensuring close cooperation with NHS partners across Wales. This work led to the cabinet secretary's agreement on the change to the Red Code set, involving collaboration across health boards, policy groups, and NHS service leadership areas.

Bethan Evans stated that she would send an email after the meeting with specific examples of how the Trust could frame things differently to be more accessible to the public. She suggested emphasising the importance of collaboration and co-production in the strategy, noting that this was fundamental to future success. Strengthening this section might better engage partners and clarify the significance of these efforts.

In addition, at the conclusion of the report addressed to the public and the patient reference group, a succinct summary might provide a more refined closing. This summary could emphasise the Trust's accomplishments over the past year while recognising the tasks that lie ahead, reaffirming dedication to patient safety and our aspiration to develop a high-quality, responsive emergency service.

In conclusion, Bethan Evans added that effective report writing required the clear communication of objectives and achievements. Including a final summary could help provide a more consistent ending.

Kate Blackmore stated that the Sway document in today's pack was updated, but the narrative Word document annex was not as the papers were already submitted.

The committee reviewed, commented in detail, endorsed and supported the onward transmission to the Board following a final review.

Jason Killens commented it was an excellent piece of work that showcased the wide range of the Trust's achievements. The journey undertaken and the exceptional efforts of everyone involved was clear.

Bethan Evans expressed her gratitude for the leadership provided by Jason Killens, noting that this would be his final attendance at the Quest meeting.

Jason Killens expressed his gratitude to Bethan and all members of the committee for their exceptional contributions to the Trust. This committee faced considerable challenges, managing extensive content and activities with remarkable dedication.

The Committee RESOLVED To review, comment on and endorse the Duty of Quality Annual Report 2024/25, subject to a final check, for onward approval at Trust Board.

Date of Next meeting: 5 August 2025

Meeting concluded at 10:15