

CONFIRMED MINUTES OF THE OPEN MEETING OF THE WELSH AMBULANCE SERVICES NHS TRUST BOARD, HELD on THURSDAY 25 MARCH 2021
Meeting Conducted via Zoom

PRESENT:

Martin Woodford	Chair of the Board
Jason Killens	Chief Executive
Lee Brooks	Director of Operations
Keith Cox	Board Secretary
Emrys Davies	Non Executive Director
Professor Kevin Davies	Non Executive Director and Vice Chair
Bethan Evans	Non Executive Director
Andy Haywood	Director of Digital Services
Estelle Hitchon	Director of Partnerships and Engagement
Paul Hollard	Non Executive Director
Nathan Holman	Trade Union Partner
Dr Brendan Lloyd	Medical Director
Rachel Marsh	Director of Planning and Performance (Part)
Hugh Parry	Trade Union Partner
Claire Roche	Executive Director of Quality and Nursing
Joga Singh	Non Executive Director
Andy Swinburn	Associate Director of Paramedicine
Chris Turley	Director of Finance and Corporate Resources
Martin Turner	Non Executive Director
Claire Vaughan	Director of Workforce & OD

IN ATTENDANCE

Cory Davies	Communications Officer
Baptiste Fesselet	Chief Ambulance Services Commissioner (Part)
Stephen Harrhy	Partners in Healthcare Lead
Leanne Hawker	Welsh Language Officer
Melfyn Hughes	
Isobel Jones	Business and Quality Manager
Alison Kelly	Community Health Council
Malcom Latham	Planning and Performance Support Officer
Melanie O'Connor	Corporate Governance Officer
Steve Owen	Corporate Governance Officer
Jeff Prescott	Business Manager
Lisa Trounce	
Emma Wainwright	Head of Communications
Rachel Watling	Senior Education and Development Lead
Kevin Webb	
Joseph Wilday	

BSL Interpreters

Rachel Williams
Hannah Wilson

17/21 WELCOME AND APOLOGIES FOR ABSENCE

Welcome and apologies

The Chair welcomed all to the meeting and advised that it was an open session of the Board; it was being conducted through the medium of Zoom and broadcasted on Facebook.

Apologies

None received

Declarations of interest

The standing declarations of interest were formally recorded in respect of:

Professor Kevin Davies, Independent Trustee of St John Cymru, Emrys Davies, retired member of Unite, and Nathan Holman, Member of the Llannon Community Council

RESOLVED: That the standing declarations and apologies as described above were formally recorded.

18/21 CHAIR INTRODUCTION AND UPDATE

The Chair informed the Board of the recent meetings he had attended and the activities he had undertaken in his role as Chair over the last two months:

1. There had been two Board workshops in which the Trust's long term strategic aspirations were considered
2. Held meetings with key NHS partners including the collaborative leadership forum
3. Met with other NHS Chairs across Wales in which several issues were discussed including the issue of hospital handover delays and how this could be resolved
4. Discussed the possibility of enhancing collaboration going forward with the Chair and Chief Executive of Cardiff and Vale Health Board
5. Continued regular dialogue with Senedd Members and politicians; in particular, met with councillors and Senedd Members in the Gower area to discuss the issues surrounding volunteers and co-responders

6. Attended the Board of the Community Health Council in which the Trust's plans for the future were discussed
7. In terms of maintaining the internal focus, the WAST live sessions had continued through Facebook, and continued to meet with Trade Union Partners on a monthly basis

The Chair paid tribute to all staff in their efforts to sustain the issues and challenges arising from the pandemic over the last year

RESOLVED: That the update was noted.

19/21 CHIEF EXECUTIVE UPDATE

Prior to his update, Jason asked that a time of reflection be given to all those who had lost their lives as a result of the virus during the past year.

In providing his update, the Chief Executive drew attention to the following:

1. A St David's Award which recognised excellence, was awarded to the Trust for its part in looking to identify new methods of cleaning ambulances throughout the pandemic
2. Several large capital programmes were underway which were running concurrently with 10 ongoing station refurbishments. A note of thanks was recorded to the Estates team for their ongoing endeavours in this regard
3. The EMS 999 international conference was hosted by WAST this week; it had been promising to reflect on the great progress made over the last decade
4. The EPCR programme was due for service wide roll out in the Autumn
5. Cymru High Acuity Response Vehicle (CHARU). This programme would maximise clinical care and ensure the consistent delivery of critical care requirements across the whole of Wales
6. Duty Operations Manager; progress had been made in terms of recruitment for this new role
7. NEPTS – transfer of work. The programme continued to progress well and it was anticipated that the final health board would be completed in the near future
8. 111/Contact First. It was noted that the roll out of 111 in North Wales would be live in the summer of 2021; this had been accelerated by approximately 12 months.

Comments:

Following a query in terms of how the Trust had sustained its activity over the last year Jason explained that in the main, all actions in the Trust had stopped to provide a focus on the pandemic during Wave one. During Wave two, the Trust continued

with some key activities including recruitment. As the new financial year commences, the Trust had taken some choices in terms of its planning and would be adding further capacity over the next 12 months

RESOLVED: That the update was noted.

20/21 PATIENT STORY

Prior to the story Claire Roche advised that at the time of this particular incident the whole NHS system was under extreme pressure, particularly in the South East of Wales. The story involved a Mr McTaggart who sustained a fall last November and had waited several hours for an ambulance to arrive.

The Board were shown a video illustrating the difficult experience of a patient and the subsequent long wait for an ambulance. In the video the patient concerned, Mr McTaggart and his wife shared their experience with the Board. The main points from the film were described below.

Mr McTaggart explained that on a Saturday evening last November around 6pm whilst walking in Chepstow, he caught his foot on a kerb and fell over. He was in pain and had struggled to move. His wife and some passers-by had managed to lift him up and sat him on a nearby wall. His wife called for an ambulance and after around an hour and a half later there had been no response from the ambulance service. In the meantime a taxi had pulled up and the driver offered assistance and explained that he could not take them to hospital but would get him home which was about a two minute drive.

Once home they managed to get Mr McTaggart to the doorway of the house under the porch and from there called for the ambulance again, the time was now about 7.45pm. The call taker advised that he should be nil by mouth and not to be given any painkillers.

The wait continued and his wife called again, it was about 10.15pm and this time it was the South West ambulance service. The call taker advised that a clinician would call back to assess the situation and within 10 minutes the call taker called back to say that unfortunately the clinician would not be calling after all.

At 00.50pm Mrs McTaggart called the ambulance service who advised that they would try and send an ambulance; during this time it transpired that WAST were trying to contact the family. At this stage Mr McTaggart was in extreme pain and discomfort with a suspected broken hip.

At around 5.15am the ambulance crew arrived and provided excellent and professional care; they took him to hospital where he was operated on the same day.

Claire Roche advised that the Trust had been in communication with the family following the incident. She expressed her thanks to them for sharing their personal experience with the Trust. Claire added that the video would be shared with health board colleagues.

Comments:

1. What can the Trust learn and do differently to improve the outcome of situations like this? Claire Roche advised Members of the positive efforts undertaken by the Trust to address the issues highlighted by this incident and to improve the overall patient experience going forward. She added that this incident occurred during a time of overwhelming demand on the service. The Trust was continually learning, monitoring and reviewing not only from the patients' outlook but also from a clinical perspective. Dr Brendan Lloyd added that the Trust was considering the hydration and analgesia aspects and was reviewing the call taker script.
2. In terms of the call taker's script, Claire advised this would also be considered in conjunction with reviewing the falls response model. The advice not to eat or drink is scripted within the Medical Priority Dispatch System, a licensed product that triages incidents. Lee Brooks gave further information regarding the compliance of the script adding that the organisation was recognised as a Centre of Excellence for how the medical triage system was applied and that the call taker could only act upon the information given at the time.
3. Jason Killens added that the waiting time endured by Mr McTaggart was totally unacceptable and apologised for this delay. He added that the Trust was seeking to improve its response times and patient outcome and gave details of the implementation plans in place to address incidents of this kind.
4. Was it the Trust's responsibility to care for patients whilst waiting for an ambulance? Claire Roche explained that any cases where it was felt there was a shared responsibility this was communicated to the relevant health board.

The Board looked forward to seeing the follow up work in terms of the falls response model, handover delays and call taker scripts.

RESOLVED: That the staff story was noted.

21/21

WAST INTEGRATED MEDIUM TERM PLAN 2021 - 2024

Jason Killens explained that this was a three year plan and was being presented to the Board for approval to submit to Welsh Government on 31 March 2021.

Rachel Marsh gave an overview of the plan and reminded the Board of the actions that had been taken to implement, assemble and development the plan.

In terms of highlights to note from the report the following was drawn to the Board's attention:

1. The plan had been built upon the long term strategy framework with the ambition to deliver excellence in all fields

2. 111/999 call answering and clinical assessment; improve and develop these services going forward aiming for better call answering services and improved patient experience
3. Emergency Medical Service Response. Continue to deliver on the demand and capacity programme. Improve in other areas such as; implementing a new model for rural services and implementation of the electronic patient care record. Going forward this would lead to improvement in ambulance response time, improved patient experience and minimise the number of patients being taken to Emergency Departments
4. Non Emergency Patient Transport Services – the transformation programme continued along with evaluating transport from the recently opened Grange University hospital. The overall aim was for improved timeliness, easier booking arrangements and an improved patient experience
5. Supporting plans and strategies; these included engaging with staff post Covid, implementing the Quality Strategy and delivering year one of the Digital Strategy. These and other aspects would not have been possible without the collaboration of Welsh Government and other stakeholders and partners
6. Risks in terms of delivering the plan included; securing stakeholder support, insufficient capacity to deliver some programmes of work, impact of Covid-19 and increases in demand. Rachel gave details in terms of how the Trust would be mitigating against these and other risks going forward.
7. A note of thanks was acknowledged to the team and others involved in the production of the IMTP

Financial Plan

Chris Turley gave an overview of the financial aspects in respect of the IMTP and drew attention to the following points:

1. Current assumed income of £242.7m and current planned expenditure of £245.5m leaving a savings efficiency productivity requirement of £2.8m
2. Key income assumptions, the majority would be funded by EASC which was £194.7m. The vast majority of this related to committed or continuing expenditure of the Trust
3. It should be noted that EASC's current confirmed available funding from health boards was £182.7m which was a £12m difference. The Chief Ambulance Services Commissioner would continue to support the delivery of the items, which included the cost of Contact First, within the £12m on a cost recovery basis
4. Savings requirement – the Board were given details in terms of how this would be delivered through workforce efficiencies, Estates waste management and fleet efficiencies amongst other schemes

5. Capital 2021/22 – Current Approved Limit was £35.652m. Plans were being developed at pace for other aspects of the Trust's future capital requirements, especially from an estates perspective
6. Financial risks – No financial plan was risk free – a number of risks were highlighted to the Board, including; the planned increase in EASC income as the plan was predicated on this, and availability of capital funding
7. A note of thanks was recorded for the team involved in preparing the financial aspect of the plan

Comments by Stephen Harrhy:

The Chief Ambulance Services Commissioner, Stephen Harrhy commented that the alignment of the finances reflected within the plan had been adhered to with the relevant due diligence. He added there had been constructive conversations with WAST colleagues noting that the overall process had been conducted very well. The commissioning intentions were clearly illustrated and reflected within the plan.

He added that the plan was in three parts, the core ambulance service, the 111 element of that and was reassured that alignment of the IMTP and the 111 was not duplicated. The third element was around business cases adding that the role of the urgent and emergency care board would be important, particularly around the contact first initiative.

In terms of the finances, he encouraged the Trust to continue to spend as required on the schemes highlighted, which were either continuing into, or due to commence early in, the new financial year, minimising the risks as necessary adding that the costs would be recovered going forward through the necessary business cases or agreed recovery on an actual cost basis.

This was an important year for the Trust in terms of putting some of the modernisation plans into practice; recognising the opportunities with the 'reset' as a consequence of coming out of the pandemic

He publicly thanked the Board and staff in the professional and caring way they had responded during the pandemic which was a credit to the Trust

Other Comments

The Chair and Vice Chair assured those in attendance that the Board had seen several iterations of the plan prior to its submission for approval today; noting that drafts of the plan had been given due diligence and scrutiny by the relevant Committees

Was there a plan to combine the digital strategy and video consultation? Rachel added it was part of the plan; Andy Haywood explained that this was being considered and gave more detail of how it would be implemented

Does the report contain sufficient detail to persuade stakeholders to support the propositions going forward? Stephen Harrhy advised that the digital strategy and the introduction of the EPCR would be really important going forward. Rachel

Marsh added that further work on several key metrics in relation to performance was being undertaken

The Chair remarked that going forward the plan was more aligned in addressing the casual factors of issues such as hospital handover delays and working in a more collaborative manner with health board colleagues

Stephen Harrhy added that the urgent and emergency care national programme was being strengthened and refreshed, this would enhance services going forward

The full support of Stephen Harrhy for the plan was critical and he was publicly thanked by the Board for his help and assistance throughout

Initial Revenue Budget for 2021/22

The Chair also brought Board members attention to the separate paper providing the Board with an initial 2021/22 revenue budget for the Trust. Building on the detail within the financial plan within the IMTP this provided more detail on how this was to be translated into detailed delegated revenue budgets.

RESOLVED: That the Board approved the IMTP including the 2021/22 financial plan, for submission to Welsh Government on 31 March 2021, subject to any minor amendments borne out of discussion. The Board also approved the initial revenue budget for 2021/22

22/21 PATIENT SAFETY HIGHLIGHT REPORT: January 2021 – February 2021

Claire Roche gave an overview of the report and drew attention to the following areas:

1. During this period the Trust had responded to over 70k incidents and received almost 95k calls relating to 111
2. There had been a reduction in cases being categorised as catastrophic
3. The two day compliance target to acknowledge formal concerns in January was 97% and in February was 100%
4. The 30 day response to formal concerns was 75% in January and 69% in February. This had been the first time in a while that it had fallen below the 75% target. This was due in the main to a number of cases being required to go through a formal complex investigative process
5. An extraordinary scrutiny panel was convened in February; following this a report was submitted to the Quest Committee. Details discussed included the high level of patient safety incidents and several learning points were gleaned from a particularly serious case in North Wales. Several actions had emanated from the scrutiny panel which were being addressed and monitored going forward; the themes, trends and priorities for improvement from this will be reported to Board through the Quest Committee as part of an aggregated review. The Chair of the Quest Committee Bethan Evans added that the

aggregated review would give Quest Committee the opportunity to learn from the emerging themes and trends

6. A total of 72 cases had been discussed at Serious Case Incident Forums (SCIF). The vast majority were categorised as patient safety incidents

Comments:

1. Clarity was sought in terms of the investigations process and how immediate actions were identified. Claire Roche explained that SCIFs were conducted on a weekly basis and should any actions be immediately identified they would be escalated as required. The patient safety learning and monitoring group scrutinised this process very closely as part of the governance process
2. A query arose as to why in the table relating to clinical reviews by health board and why the action for the Cwm Taf health board was blank. Andy Swinburn explained that this particular review was still under investigation

RESOLVED: That the report was received for information, discussion and noting.

23/21 MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT

Rachel Marsh reminded the Board that the report was still being refined adding that Members had the opportunity to direct further scrutiny on a particular subject to the relevant committee.

In terms of the report Members' attention was drawn to the following areas:

1. 111 call answering times; the abandonment rate in February was lower than 5% however there was significant variability across Wales. It was noted that recruitment for an additional 86 call handlers was well underway and this would allow for the abandonment rate to be kept low
2. An initial forecast had been undertaken to consider whether the red response target of 8 minutes would be met in April taking into account Covid; it was anticipated that the target would be achieved
3. In terms of workforce, the number of hours being produced had improved significantly.
4. Hear and Treat rates after 999 calls were increasing; 8.2% in Feb 2020 compared to 9.2% in February 2021, a positive step for the Trust
5. The Trust were conveying less patients to ED; 44% in January 2021 compared to 52% in January 2017. Further work was ongoing to improve this figure
6. Handover lost hours; these had improved from the same position last year, 6,155 hours lost in February 2021 compared to 7,232 in February 2020

Comments:

1. The Chair of the Finance and Performance Committee Emrys Davies, welcomed the report and noted that the report captured more relevant detail on the key issues that should be focussed on going forward
2. Members expressed concern in terms of staff sickness and how it would be managed going forward. Claire Vaughan advised that the situation was being monitored through the People and Culture Committee and gave an overview of the initiatives and active discussions in place to address the sickness rates. This included the effects of long Covid
3. In terms of handover delays and post production lost hours, how were these being monitored and scrutinised. Rachel Marsh explained that the Trust worked collaboratively with health boards and the Chief Ambulance Services Commissioner in addressing the handover delays. In terms of post production lost hours, Rachel explained that efforts to address this was a priority, albeit not entirely in the Trust's gift, adding that the Trust was working in partnership with Trade Union colleagues to resolve
4. Lee Brooks commented that military support was ending on 31 March 2021 and their assistance to the Trust was duly noted and had been greatly appreciated.

RESOLVED: That

(1) the Trust's February 2021 Integrated Quality and Performance Report and actions being taken were considered and determined whether:

- a) the report provided sufficient assurance;**
- b) further information, scrutiny or assurance was required e.g., deep dive, referral to relevant committee; or**
- c) further remedial actions to be undertaken through Executives.**

24/21 FINANCIAL PERFORMANCE MONTH 11

Chris Turley explained that the report provided the Board with a summary update on the revenue financial performance as at Month 11. The Board noted that the Finance and Performance Committee had recently received an update on the Trust's financial position

The Board's attention was drawn to the following areas:

1. The Trust continued to broadly breakeven month on month, with a small year to date reported surplus of £65k;
2. The Trust was forecast to breakeven for the 2020/21 financial year;
3. Welsh Government (WG) had now confirmed full recovery of Covid-19 related costs, which had been invoiced direct;

4. Capital expenditure was forecast to be fully spent in line with updated plans and the WG set Capital Expenditure Limit;
5. Risk of deviation from forecasts at this stage of the financial year were now considered to be very low;
6. The planning and interim audit work for the 2020/21 accounts was continuing; details of the submissions date for the annual accounts was given

RESOLVED: That

- (1) the Month 11 revenue and capital financial position and performance of the Trust as at 28 February 2021 was noted; and**
- (2) the Month 10 and Month 11 Welsh Government monitoring return submission included within Appendix 1-4 of the report (as required by WG) was noted.**

25/21 RISK AND BOARD ASSURANCE FRAMEWORK

The Board Secretary Keith Cox gave an overview of the report reminding the Board of the process of risk evaluation through Committees and the overarching monitoring through the Audit Committee. He drew attention to the following highlights from the report:

1. There were two high risks on the register which related to patients waiting both in the community and outside ED's
2. Four risks had been de-escalated from the Corporate Risk Register (CRR); these were around RIDDOR reporting, cleanliness in ambulance stations, Fit testing and masks in Trust vehicles. These risks will continue to be monitored via the Quality Directorate register
3. One risk had been closed; this related to the transfer service for Aneurin Bevan health board
4. No new risks had been added the CRR

Comments

1. The Chair added that the risks had been drawn out from other reports on the Agenda
2. Keith added that risks were scrutinised in more detail at Committee level in relation to those risks which were relevant to them

RESOLVED: Members received assurances on the contents of the report; specifically relating to:

- (1) the risk management activity since the last Trust Board in January 2021;**

- (2) the changes to existing Corporate Risk scores, oversight, and management; and**
- (3) received and commented on the BAF report.**

26/21 IMPACT OF UK WITHDRAWAL FROM THE EUROPEAN UNION/EUROPEAN SINGLE MARKET

Estelle Hitchon reminded the Board that The United Kingdom left the Single European Market on December 31, 2020, marking the end of the transition period following the UK's exit from the European Union on January 31, 2020.

The exit from the European Single Market on December 31, 2020 had not resulted in any issues of note, largely as a result of extensive local and national planning. The overall Impact on the Trust had been relatively minimal and the Trust would continue to report to Welsh Government as required.

RESOLVED: That

- (1) the Board noted the contents of the report;**
- (2) the Board noted that no further reports on this matter were scheduled. Any further update e.g. the stepping down of reporting to Welsh Government, would be provided verbally; and**
- (3) the Board formally recorded its thanks to the Head of Resilience and the wider Brexit Planning Group for their efforts in operationally managing the process of planning for the impact of the UK's withdrawal from the European Union on the Welsh Ambulance Service, particularly given other pressures introduced by the Covid-19 pandemic.**

27/21 QUESTIONS FROM MEMBERS OF THE PUBLIC

Estelle Hitchon advised the Board of the following questions advising that any questions raised by staff would be addressed at the next WAST live event:

1. Several observations were raised from the Community Healthcare Council's (CHC) perspective and the questions and issues they received from the public in relation to delays they were experiencing. Lee Brooks advised that there were processes in place which checked on the welfare of patients who were waiting for an ambulance response. However when demand was high this could be more challenging. He added that pilots had been undertaken elsewhere in the UK of providing estimated arrival times. Lee reflected it was beneficial to hear sharing this would assist patients determine what may be in their own interest and hoped that his team would be able to develop and use this.
2. Reassurance was sought in terms of the actions being taken in minimising delays. Lee Brooks reflected that the meeting had already discussed impacts and actions regarding this topic and referred to one of the Trust's work

streams, the Operational Delivery Unit, which by next year would enhance the Trust's capacity and coverage.

3. In terms of GP and primary care Dr Brendan Lloyd advised that the Trust was working closely with GP's and maintained robust links with primary care. Any issues raised through primary care relevant to the Trust were being addressed.

RESOLVED: That the questions were noted and where applicable an answer provided.

28/21 PROCEDURAL MATTERS

The following procedural matters were brought to the Board's attention:

The Chair provided an overview of the items discussed at yesterday's closed session of the Board which included;

1. Two high value claims
2. Appointment of a third party to implement the Demand and Capacity review
3. Considered the Estates and Fleet Strategic Outline Plans which contained potentially commercially financial details

Minutes

The minutes of the open session of the meeting of the Board held on 28 January 2021 were confirmed as a correct record.

Action Log – No actions

Use of the Trust Seal

Since the last Trust Board meeting, the Trust seal was used as follows:

- a. Updated lease for Cwmbran ambulance station
- b. Transfer of title relating to Bassaleg Mortuary from Newport City Council

Committees Terms of Reference (TOR)

The Board considered the amended TOR for each of its Committees and it was confirmed that the Board were content to agree the TOR

Chairs Action

Details were given by Keith Cox, the full Minutes would be provided at the next Board for ratification. These related to a Chairs Action on 24 February relating to additional accommodation in the Cwmbran area and the second one held on 12 March which related to the extension of the digipen contract

RESOLVED: That

- (1) the items as described were discussed at the closed session of the Board were noted;
- (2) the Minutes of the Open Trust Board meeting held on 28 January 2021 were confirmed as a correct record;
- (3) there were no actions on the log;
- (4) the use of the Trust seal as described was noted;
- (5) the amended Terms of Reference (TOR) and operating arrangements for its Board Committees as set out in Annex 3 were approved; and
- (6) the Chairs Action Minutes from 24 February 2021 and 12 March 2021 would be provided at the next meeting.

29/21 COMMITTEE UPDATES

Updates to the accompanying Executive Summaries were given on the People and Culture, Finance and Performance, Quest and Audit Committees by the respective Chairs where applicable

People and Culture:

1. There was significant progress around the vaccination programme
2. Staff survey results and the ongoing actions were being monitored on a regular basis
3. In terms of the People and Culture strategy, the priorities for the coming year had been agreed

Quest:

The Chair advised that a full and varied agenda was discussed at the meeting, many of the key issues had already been mentioned at Board.

Audit

1. Noted that Internal Audit and Audit Wales colleagues had been very supportive
2. Audit Tracker and risk management framework had been discussed in detail

Finance and Performance

1. A Peer review of the 111 service was conducted
2. Approved transfer of NEPTS services from Aneurin Bevan and Betsi Cadwaldr health boards
3. Approved the Vehicle disposal policy

RESOLVED: That the updates were noted and received.

33/21 MINUTES OF COMMITTEES

The Minutes of the following Committees were presented for endorsement:

- a. 13 October 2020: People and Culture Committee
- b. 1 December 2020: Quest Committee
- c. 3 December 2020: Audit Committee
- d. 14 January 2021: Finance and Performance Committee

RESOLVED: That the above minutes from the meetings as described were received and endorsed.

31/21 ANY OTHER BUSINESS

The Board endorsed their thanks to the specific teams involved in being recognised for the St David's award for their work in partnership with other organisations in achieving a rapid sanitisation solution for the Trust.

Date of next meeting: 27 May 2021