

**CONFIRMED MINUTES OF THE OPEN MEETING OF THE WELSH AMBULANCE SERVICES NHS TRUST BOARD, HELD on THURSDAY 27 MAY 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
Ceri Jackson	Non Executive Director
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**

Andrew Challenger	Senior Education and Development Lead
Stephen Clarke	Head of Mental Health
Sarah Davies	
Helen Higgs	Head of Internal Audit (Part)
Melfyn Hughes	Welsh Language Officer
Alison Kelly	Business and Quality Manager
Malcolm Latham	Member of CHC
Sian Meredudd	
Nicola Matthews	
Steve Owen	Corporate Governance Officer
Jeff Prescott	Corporate Governance Officer
Jeff Price	Senior Education and Development Lead
Rachel Watling	Head of Communications

## **BSL Interpreter**

Hannah (part)

### **32/21 WELCOME AND APOLOGIES FOR ABSENCE**

#### **Welcome and apologies**

The Chair welcomed all to the meeting, in particular interim Non Executive Director Ceri Jackson who had joined the Trust in April and Jeff Price who was due to retire soon and would be presenting the staff experience. He advised that the meeting that it was an open session of the Board; and 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. In addition, Ceri Jackson advised the Board that she was a Trustee of the Stroke Association

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

### **33/21 CHAIR 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:

#### **Internal**

1. Regular meetings with the Chief Executive, NEDs and the Board Secretary.
2. Trust live sessions via Facebook
3. Attainment ceremony for ambulance technicians receiving their diplomas online (4<sup>th</sup> occasion)
4. Held three review sessions with the Chief Executive in order to sign off his delivery against performance objectives for the previous year and for the year ahead. The Chair added that the work by Jason Killens leading the Trust through the pandemic had been exceptional
5. Recruitment exercise for the new Board Secretary; name of replacement would be announced in due course
6. Several meetings offline with NED's, Chief Executive and other Board Members to consider the Board's future strategic role and its development as a team going forward

#### **External**

1. Meetings with all the Chairs of health bodies across Wales; these were of vital importance and were the platform to exchange ideas and to work together on common issues
2. Attended meetings of the Association of Ambulance Chief Executives; these proved to be very important in terms of learning and gaining ideas from each other
3. AACE sponsorship Leadership Forum event which in essence was about what lessons could be learned from each organisation
4. NHS Confederation Management Policy Group
5. Informal meetings with ambulance commissioners
6. Meetings with Dr Andrew Goodall, Director General of Health and Social Services

The Chair added that the meetings revolved around what positive impact on the NHS these meetings could have and to consider what, if any direct action could be taken, problem solving and removing barriers to progress initiatives forward.. The most important factor was to, collectively with partners and other organisations, bring about beneficial change to the overall NHS system in Wales

**RESOLVED: That the update was noted.**

#### **34/21 CHIEF EXECUTIVE UPDATE**

Jason referred to the remarks made by the Chair regarding his appraisal and commented it had been a complete team effort during the pandemic

In providing his update, Jason Killens drew attention to the following:

1. There were several ongoing major projects which included the new Matrix House/New Training School – The Training Team had moved to new premises on 19 April 2021 and officially opened on 25 May 2021.
2. Senior Paramedic recruitment - Since January, the Medical and Clinical Services Directorate's Clinical Leadership Team have been supporting the Operations Directorate with the Senior Paramedic recruitment. To date, 3 cohorts of staff have undertaken an intensive week's training with the senior clinical team. Andy Swinburn added that in terms of recruitment, 31 of the 32 had now been appointed. He asked that a note of thanks be recorded for those involved in the recruitment
3. Relaunch of the Welsh Ambulance Services NHS Trust Improvement and Innovation Network (WIIN) Relaunch and Planning. This was an opportunity for all staff to engage in ideas for improvement and to effect change and was pleasing now to have this up and running again
4. The Volunteering Strategy was in the process of being finalised and signed off with the aim of broader consultation commencing during National Volunteer Week (1st – 7th June 2021). This was another step forward in valuing the contribution of these volunteers. Lee Brooks gave details of how the strategy had been

implemented and developed through the collaboration of volunteers. This had played a significant part in terms of the strategy going forward.

Comments:

1. Were any Trust staff still on the Cefn Coed site? Chris Turley explained that all of the previously permanently based staff had now moved off the site but that there were some NEPTS operational staff who were now temporarily based there but advised of a plan for them to move within the next few months
2. Members noted improvements both in the numbers of staff having the flu vaccine and waiting times for staff to access occupational health services
3. When will funding for mental health practitioners within the clinical contact centre become available? Rachel Marsh explained that, following active discussions with the Commissioner, funding had been made available and gave details in terms of how it would be progressed
4. Following a query in terms of quality and performance and how the Trust saw this going forward, Jason Killens commented that qualitative measures and outcome metrics would become increasingly more relevant. Rachel Marsh added that the quality and performance framework sets out the Trust's aspirations and objectives and methods to measure progress.
5. The funding from Macmillan Cymru to improve End of Life Care was this just for adults? Brendan Lloyd explained it was not limited to adults only and gave further details in terms of how the funding would be used

**RESOLVED: That the update was noted.**

**35/21**

**STAFF EXPERIENCE**

Claire Vaughan introduced Jeff Price, Senior Education and Development Lead who was soon due to retire following 38 years of service with the Trust

Jeff Price, through a Power point presentation, gave an overview of his career with the Trust providing details in terms of how things had changed during the past 38 years.

He joined the ambulance service in 1983 and spent the first two years of his career working in patient transport as an ambulance driver.

Following completion of the extended ambulance aid course he became a leading ambulance man and after several years decided to go into full time training.

Jeff then gave details in particular how paramedic education had changed over the years both in the time now taken to achieve the paramedic qualification and the huge improvement and enhancements in teaching resources now available.

The new education and development centre in Matrix one had recently been opened and Members were shown images of the training facilities. Of particular

note was the immersive training area which could simulate several realistic scenarios.

Jeff paid tribute to colleagues who had passed away during the pandemic and the Board noted that two of the training suites bore their names

Comments:

1. Claire Vaughan personally thanked Jeff for presenting his story to the Board and in giving them the opportunity to see a virtual guided tour of the newly opened training facility
2. In terms of the technological and cutting edge advances in training, in particular the immersive training area, how would this be shared going forward? Claire Vaughan advised there were several interested strategic partners in particular Swansea University who were keen to mimic the environment. She added that it would be useful in supporting the Trust with its application for University status. Andrew Challenger commented that the Trust was collaborating with Health Education and Improvement Wales and other outside agencies in developing and influencing clinical education going forward.

The Board thanked Jeff for his story and noted the incredible progress that had been made and particularly the achievements in the training over the last year.

**RESOLVED: That the staff experience was noted.**

36/21

## **INTEGRATED MEDIUM TERM DELIVERY: STRATEGIC TRANSFORMATION PROGRAMMES – STRUCTURE AND GOVERNANCE**

Rachel Marsh explained that the purpose of the report was to advise the Board of the structure and governance/reporting arrangements for Strategic Transformation Board (STB) and the transformation programmes that it would oversee.

Members recognised that the plan had been positively received by Welsh Government and the recommendations received had been addressed and would be actioned going forward. These recommendations related to Covid costs, hospital handover delays and response performance targets.

Five transformation programme boards would be established to deliver on the “Ambitions” section of the IMTP: Rachel gave further details in terms of each one

1. EMS Operational Transformation
2. Ambulance Care Transformation
3. Gateway to Care,
4. Clinical Transformation
5. 111 Digital

In terms of providing assurance the Board understood that at subsequent Board meetings, updates would be provided on the deliverables as set out in the IMTP through the Strategic Transformation Board

Comments:

1. Resourcing of transformation programme boards – was there an opportunity to utilise external assistance for example from the wider health service? Rachel advised that health boards were collaborated with on a frequent basis and would consider how to improve this further
2. Was the Trust able to identify the priorities listed in health board IMTP's and how they merged with WAST's? Rachel commented that the Trust maintained an intelligence link with health boards and was able to recognise their priorities

**RESOLVED: That the Board noted:**

- (1) the overarching structure and governance/reporting arrangements being put in place; and**
- (2) the risks highlighted in the report.**

### **37/21 QUALITY STRATEGY 2021 -2024**

Claire Roche gave an overview of the report by means of a Power point presentation which included the development of the strategy through three key factors, however, due to the pandemic this had been paused

The three key factors influencing the strategy: Delivering Excellence, Health and Social Care (Quality and Engagement) (Wales) Bill, A Healthier Wales and Health and care standards. Claire gave further details on each of these aspects highlighting each and stressing the importance of each one.

The Trust supported a culture of quality and candour; whereby staff were able to report when things don't go quite right and continue to learn; this was also considered from the patient's perspective

In order to identify priorities for improvement, the Trust's Quality Management Systems enabled it, through accelerating quality responsiveness and integrating quality management with strong governance and quality management structures, to achieve that goal

The Trust maintains an excellent platform to engage with the public having established several networks. One of the Trust's aims was to reach diverse and hard to reach groups by embedding the citizen voice stretching across all parts of Wales

In terms of the Wider Leadership Team within the Operational Directorate, Claire gave details in respect of how they had influenced the strategy

The Chair of the Quest Committee, Bethan Evans provided Board members with further input on the strategy advising that it had been comprehensively discussed at the last Quest meeting. Committee members had been given ample opportunity to provide feedback. Bethan stressed that the strategy must be owned by all and the

existing partnership held with several organisations across Wales should be expanded upon. The Committee recommended the strategy for approval.

Comments:

1. Lee Brooks commented that quality was driven by teams and individuals within the Trust and looked forward to establishing clear governance routes to achieve the quality ambitions
2. Connectivity across directorates was key to the success of the quality strategy
3. What was likely to change as a consequence of the strategy as it was not entirely clear within the report? And would there be any measurable improvement? Claire Roche explained it was challenging to garner the quality metrics as patient outcomes were not always available.
4. Were the right infrastructures, systems and capacity in place to be able to process the relevant information gleaned from patients in relation to strategic priorities? Estelle Hitchon assured the Board that work was ongoing to ensure the relevant data was captured
5. It was recognised that quality affected everything throughout the Trust, be it a directorate or individuals
6. The Trust should be proactive in setting its own targets for improvement; staff must understand how to raise any issues and be aware of any support.
7. The challenge for almost all organisations was to get the views of 18 -50 age group – the Trust tends to rely on young people, older adults and protected groups. How can this middle group be motivated to engage?

The Chair thanked Claire for the excellent presentation which was a really good approach to embedding quality to all involved in delivering services across the Trust

**RESOLVED: That the quality strategy 2021-2024 was approved.**

## **38/21 MENTAL HEALTH AND DEMENTIA PLAN 2021 -2024**

Stephen Clarke presented the plan by way of a Power point presentation and drew attention to the following points:

1. The plan had been developed through various engagements and workshops, most notably with service users and carers
2. The plan was aligned with several other NHS Wales organisations, strategies and documents
3. Mental Health conditions were very common in Wales and the number of people suffering with dementia was increasing; the impact of these on the Trust were unavoidable

4. During the pandemic there was a large increase in mental distress, particularly in young people
5. The priorities going forward included; improving staff skills and knowledge, using best practice and working in partnership particularly with carers

Comments:

1. The Chair of Quest Committee, Bethan advised the Board that Quest had previously seen the plan and gave details of the discussion held. She stressed that partnerships were crucial to success of the plan. It was pleasing to see that Welsh language standards had been incorporated within the plan; it was very important to have the potential to deliver services in Welsh
2. It was good to note the connections between this plan and the overall organisational well-being strategy and the commitment to increase the understanding and access to mental health within the workforce
3. The knowledge sharing between other organisations will be of immense help in ensuring patients have the correct level of support going forward
4. In terms of sickness levels why were these not included within the plan? Steve commented that the aim of the plan was to focus on the service provided as opposed to linking with staff sickness levels
5. The strategy clearly demonstrated the need to have a mental health practitioner and other associated resources
6. Following a query in terms of the strategy being aimed at patients and carers suffering a mental health crisis, Steve Clarke advised that work to inform the public regarding crisis care was continuing

The Board thanked Steve for developing the plan and were very pleased to see the commitment to support staff and improve communication with them in terms of mental health going forward. Following further discussion and an update by Steve Clarke on the engagement process with partners, the Board approved the plan

**RESOLVED: That the Board;**

**(1) noted the internal and external consultation on the plan**

**(2) approved this version of the plan; and**

**(3) noted that translation into Welsh was in hand and both versions would be published simultaneously.**

**39/21**

## **MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT DASHBOARD – APRIL 2021**

Rachel Marsh, prior to presenting details of the report, gave an overview of the performance indicators and how they demonstrated progress in meeting the Trust's strategic objectives.

The Board's attention was drawn to the following key issues:

1. Call answering and abandonment rates – these were now starting to improve
2. Response to red and amber patients had deteriorated slightly in April from the previous month, future response targets, following some forecasting, were unlikely to improve. Work was ongoing to mitigate this by way of a deep dive, the outcome of which will be reported to the Finance and Performance Committee.
3. Whilst the Trust remained in the monitoring phase of the pandemic it would continue to protect the Emergency Ambulance capacity and will change once the Trust moved into the recovery phase

#### Comments

1. The Chair of the Finance and Performance Committee Emrys Davies updated the Board on discussions held in particular the two risks relating to the red performance target and ability to attend.
2. Deep dive into response times, was the additional time taken to don level three PPE factored in? Jason Killens added that whilst the target of reaching patients on a red call within eight minutes on 65% of occasions was not currently being met, the nine minutes target was comfortably over the 65% target. He further commented that the deep dive would consider several elements including; activity, challenges from ED congestions and the requirement to don level three PPE
3. Post production lost hours seemed to be on the increase, was this likely to continue; Lee Brooks gave details of the correlation between lost hours and hospital handover delays. Other factors affecting the lost hours was the introduction of cleaning vehicles between every patient and the return to base for meal breaks. Was there a geographical correlation for example where there was the highest delay was this also where the highest production hours were lost. Lee added the work on this was continuing to establish any correlations
4. In terms of sickness absence, Claire Vaughan advised that sickness levels were decreasing; approximately 25% of sickness related to mental health. Claire advised members of the ongoing work to address long Covid cases, which were decreasing. There was a focus on staff well-being and Claire gave details of the initiatives and support available to staff.

**RESOLVED: That**

**The Trust's April 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, or**

**c) further remedial actions to be undertaken through the Executive Management Team**

**d) the discussions including those regarding sickness and the planned deep dive was noted**

#### **40/21 FINANCIAL PERFORMANCE MONTH 1 2021/22**

Chris Turley, prior to presenting the 2021/22 Month 1 financial position, updated on the draft accounts for the previous year which would be presented to the Board next month. He added that all the statutory and financial duties had been met, subject to audit.

In terms of Month 1, Chris drew attention to the following highlights from the report:

1. Continued run rate in terms of a revenue performance, providing a balanced financial position
2. Continued to incur unavoidable Covid spend, it was assumed additional funding would be provided to support these costs, an approach supported in discussions with Commissioners and WG
3. Other income assumptions; the Trust continued to receive assurance from the Commissioner that the income was forthcoming to fund several schemes agreed as part of the IMTP / annual plan for 2021/22 and for which costs were continuing or starting to be incurred.

#### **Comments**

Emrys Davies commented that the F and P Committee had discussed the report in detail adding that a more detailed cash flow forecast in terms of the discretionary capital spending had been requested

#### **RESOLVED: That the Board:**

- (1) noted and gained assurance in relation to the Month 1 revenue and capital financial position and performance of the Trust as at 30 April 2021;**
- (2) noted the Month 1 Welsh Government monitoring return submission (as required by Welsh Government); and**
- (3) noted the outturn from the previous financial year, ahead of the accounts being presented to Board for approval next month.**

#### **41/21 RISK MANAGEMENT AND BOARD ASSURANCE FRAMEWORK**

Keith Cox outlined details from the report and drew attention to the following:

1. There were currently 17 risks on the Corporate Risk Register

2. The two highest scoring risks which related to handover delays and reaching patients in the community in a timely manner
3. Five risks had been deescalated to the relevant Directorate Risk Register; these in the main related to cleaning of ambulance stations and wearing masks
4. One risk had been closed (Digi Pen)

Comments:

1. Health Inspectorate Wales fieldwork timeline, when was the report expected to be concluded? – Jason Killens commented that the work was ongoing and would be reported to Quest in due course. Claire Roche added that the report was due June/July.
2. The Chair of the {People and Culture Committee Paul Hollard commented that the risk relating to driving ability may escalate to the CRR
3. In terms of the two highest risks should there be more detail provided around the outcome of patients? Bethan advised that these risks were discussed in depth at the last Quest meeting; adding it was recognised as a system wide issue affecting all parts of Wales. Claire Roche and Jason Killens gave examples of the ongoing collaborative work in order to; alleviate and defray activity from ED's and to manage patients in the Community in a safe alternative way.

Following further discussion it was agreed that the BAF report be presented earlier in the Agenda at the next Board meeting and attached to it a deep dive on risks 223 and 224. It was further agreed that offline discussion would take place to ascertain the content of the attached report notwithstanding that both the evidence provided to the ambulance task force and the full conclusion of HIW work may not be ready

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

- (1) the risk management activity since the last Trust Board in March 2021;**
- (2) the changes to existing Corporate Risk scores, oversight, and management;**
- (3) received and commented on the BAF report; and**
- (4) the Risk and BAF be moved to the start of the Performance, Governance and Assurance Section**

**42/21 QUESTIONS FROM MEMBERS OF THE PUBLIC**

Estelle Hitchon advised the Board that no questions had been tabled. However it was noted that a comment from a viewer in the Swansea area had given positive feedback from his recent experience with the Trust

## **43/21 PROCEDURAL MATTERS**

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

### **Minutes**

The minutes of the open session of the meeting of the Board held on 24 March 2021 (Closed) and 25 March 2021 (Open) were confirmed as a correct record.

### **Action Log**

Number 41: Patient story video (McTaggart), confirmed this had been shared with health board colleagues. Action Completed

Number 42: Actions from Patient story (McTaggart) Update on details of follow up work in respect of the falls response model, handover delays and call taker scripts was provided. Action Completed

Number 43: Chairs Actions Minutes to be included on Agenda. Action completed

### **Use of the Trust Seal**

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

- a. Number 0222, refurbishment of works to Matrix
- b. Number 0223, refurbishment to Aberaeron ambulance station

### **Chair's Action**

The Minutes of the Chair's Actions held on 24 February and 12 March 2021 were submitted for ratification

### **Covid-19 Governance Arrangements**

The Board noted the update to governance arrangements provided by Welsh Government.

### **RESOLVED: That**

- (1) the Minutes of the Closed and Open Trust Board meetings held on 24 March 2021 and 25 March 2021 respectively were confirmed as a correct record;**
- (2) the actions on the log were considered and implemented accordingly;**
- (3) the use of the Trust seal as described was noted;**
- (4) the Chairs Action Minutes from 24 February 2021 and 12 March 2021 were ratified; and**

- (5) the update from Welsh Government in terms of Covid-19 governance arrangements was noted.

#### 44/21 COMMITTEE UPDATES

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

##### **Quest:**

1. Quality strategy and Mental health and Dementia plan
2. Summary of the patient safety highlight report
3. Scrutiny panels

##### **People and Culture:**

1. Noted revalidation of gold corporate health standard
2. UCS recruitment and driver licensing
3. Several all wales policies were approved
4. Organisational behaviours work
5. Partnership working annual report

##### **Finance and Performance**

1. Accepted closure report on the 111 peer review
2. Sustainability and decarbonisation funding from Welsh Government has been allocated
3. Estates work discussed in the closed session

##### **Academic Partnership Committee**

1. Letter received from WG encouraging the Trust to apply for university status with some new criteria
2. Plan to bring a paper to the July Board looking at next steps in terms of the wider engagement
3. Estelle Hitchon updated the Board on the next steps in terms of university status

**RESOLVED: That the updates were noted and received.**

#### 45/21 MINUTES OF COMMITTEES

The Minutes of the following Committees were presented for endorsement:

- a. 4 February 2021, People and Culture Committee
- b. 23 February 2021, Quest Committee
- c. 11 March 2021, Finance and Performance Committee
- d. 8 December 2020 and 9 March 2021, Remuneration Committee

**RESOLVED: That the above minutes from the meetings as described were received, endorsed and formally adopted.**

**46/21 ANY OTHER BUSINESS**

Emrys Davies asked the Board to note that in terms of Welsh Language standards compliance an extension had been requested. Keith Cox updated the Board with further information in terms of correspondence with the Welsh Language Commissioner

Martin Woodford informed the Board it was standard practice to ask members what went well and what areas could the Board improve on. It was agreed that Keith Cox would circulate an e mail to Members asking for their feedback

**Date of next meeting: 29 July 2021**