

**CONFIRMED MINUTES OF THE OPEN MEETING OF THE WELSH AMBULANCE SERVICES NHS TRUST BOARD, HELD on THURSDAY 30 MARCH 2023 MEETING HELD IN CARDIFF AMBULANCE STATION, and VIA ZOOM**

**Meeting started at 09:30**

**PRESENT:**

Colin Dennis	Non-Executive Director and Chair of the Board
Jason Killens	Chief Executive
Lee Brooks	Executive Director of Operations
Bethan Evans	Non-Executive Director
Estelle Hitchon	Director of Partnerships and Engagement
Paul Hollard	Non-Executive Director
Ceri Jackson	Non-Executive Director
Angie Lewis	Director of Workforce and Organisational Development
Dr Brendan Lloyd	Executive Director of Medical and Clinical Services
Rachel Marsh	Executive Director of Strategy, Planning and Performance
Trish Mills	Board Secretary
Hugh Parry	Trade Union Partner
Hannah Rowan	Non-Executive Director
Leanne Smith	Interim Director of Digital Services
Joga Singh	Non-Executive Director
Andy Swinburn	Director of Paramedicine
Chris Turley	Executive Director of Finance and Corporate Resources
Martin Turner	Non-Executive Director
Liam Williams	Executive Director of Quality and Nursing

**Attendees**

Navin Kalia	Deputy Director of Finance and Corporate Resources
Steve Owen	Corporate Governance Officer (Via Zoom)
Alex Payne	Corporate Governance Manager
Jeff Prescott	Corporate Governance Officer (Via Zoom)

**Apologies**

Kevin Davies	Non-Executive Director and Vice Chair of the Board
Damon Turner	Trade Union Partner

**20/23 WELCOME AND APOLOGIES FOR ABSENCE**

**Welcome and apologies**

The Chair welcomed all to the meeting and noted apologies had been received from Kevin Davies and Damon Turner.

## **Declarations of interest**

The Board noted that all declarations of interest were formally recorded on the Trust's declarations of interest register.

**RESOLVED: That the apologies as described above and declarations of interest on the register were formally recorded.**

## **21/23 PROCEDURAL MATTERS**

The Chair reiterated that the Board meeting was part of the overall scrutiny and assurance process with much of the detailed work undertaken in the committees, that meet prior to the Trust Board, and that Committee AAA highlight reports, which featured later in the Agenda, together with committee minutes, all adds to the overall assurance and scrutiny process. He added that all Committee meetings had been quorate and well attended.

Minutes: The Minutes of the Board meetings held on 26 January 2023 were presented and confirmed as a correct record.

Action Log: The Board received the action log and noted the updated position.

Action number: 133/22, MIQPR, information on cultural measures. This was to remain on the Action log until further information was collated in this area.  
Action number 007/23, Risk - To consider in how much detail the Board should discuss the higher rated risks, this action was marked as completed and therefore closed.

**RESOLVED: That**

- (1) the Minutes of the meetings held on 26 January 2023 were confirmed as a correct record.**
- (2) the update on the action log was noted.**

## **22/23 CHAIR'S REPORT AND UPDATE**

The Chair updated the Board on the recently held Board development days which focused mainly on the Integrated Medium Term Plan and the new legislation regarding the Duty of Quality and the Duty of Candour.

**RESOLVED: The update was noted.**

## **23/23 CHIEF EXECUTIVE'S UPDATE**

*Prior to the update the Board held a Minutes silence to pause and reflect on the sad loss of colleague Huw Phillips.*

In presenting his report, Jason Killens drew the Board's attention to the following:

The Board were informed that colleagues Aron Roberts and Lee Brooks had been admitted to the Order of St. John, the investiture will be held in the next few months.

A significant amount of work was being undertaken across the Trust's Estate with several schemes having completed during this financial year. The effort and work of the estates team in delivering this was acknowledged by the Board.

End of Life Care – Following a recently published Cross Party Group enquiry on the experiences during the Covid-19 pandemic in Wales, the Trust has now introduced 'Just in Case' medications onto frontline vehicles allowing paramedics in Wales to provide the best possible symptom management, and the introduction of palliative care paramedics. Both these initiatives were UK ambulance service firsts, and following their success have since been mirrored in other UK ambulance Services.

There have been two projects recently which have seen the use of robotic Process Automation (RPA). RPA has been used to simplify the transfer of files between the 111 service and GP Out of Hours and also the Concerns team have used it to convert some of their manual tasks into automated processes. The Robotic Process Automation pilot concludes at the end of March 2023, thereafter a full evaluation and benefits realisation report will be published.

A business case has been shared with the Chief Ambulance Services Commissioner (CASC) which sets out a proposal to develop the use of alternative responders to connect with patients in the Community via Clinical Contact Centres. The name currently given to this scheme was the 'Amber Virtual Ward.'

There continue to be improvements in the NHS Wales 111 service whereby amongst other initiatives there have been over 50 clinicians who have been given support to undertake a Masters level module in remote Clinical Decision Making.

Comments:

The Board welcomed the excellent work regarding palliative care and were delighted to see it progressing.

Members sought feedback following a Directors meeting in respect of the engagement framework. Estelle Hitchon advised there had been some feedback most noteworthy around the governance of the framework and how that would be developed

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

## **24/23 QUESTIONS FROM MEMBERS OF THE PUBLIC**

The Board were advised that at this time no questions had been received; Estelle Hitchon informed the Board that the Communications team were actively monitoring for any live questions during the meeting.

## **25/23 PROGRESS ON ACTIONS TO MITIGATE AVOIDABLE PATIENT HARM**

Jason Killens explained that the report was designed to inform the Board of progress on the actions to mitigate avoidable patient harm; he drew out the following areas for the Board's attention:

The current position in terms of handover delays was of increased concern, along

with the number of long waits outside hospitals; however there had been significant improvement in the Cardiff and Vale University Health Board area.

In terms of Red performance this was in the high 40 percentage points and for Amber, the median was around three hours.

Rachel Marsh gave an update on the action plan with those within the Trust's control making good progress, however, there still remained Red actions, which were outside the Trust's control.

There were some new actions – Amber Virtual Ward, a proposed innovative “eyes on” service provided by the third sector (organisation and volunteers), supported by the Clinical Support Desk and supported by technology and the need to find a better way to safely manage patients within the Trust's care.

The Board's attention was also drawn to action 24, which focused on Red calls and how to improve response times and to look at resource allocation. Rachel Marsh assured the Board that the Trust continued to work in improving the overall situation.

Lee Brooks updated the Board in terms of the impact on ambulance waiting times outside hospitals and provided data, recognising that Health Boards had committed to a 25% reduction in lost hours and an eradication of the four hour or longer delays. The data showed that in December (worst on record) an average of 1k hours per day was being lost, January was 738 hours and February it was 665 hours. Unconfirmed data through to March 27 indicates that the hours lost are around 908. In terms of the four hour or over delays, data showed that in December there were 95 daily occurrences, 65 in January, and 59 in February and up to March 27, 91. He added that patient harm was inevitable in times of increase delays.

Members were also updated by Lee Brooks on the risk to the Trust's legal obligations to immediately respond without delay to a major or mass casualty incident. He added that every incident of this nature was subject to a debrief with any lessons being learned. He raised his concern that sometimes with up to 60% of emergency ambulances being held outside hospitals, the ability to meet those legal obligations could be jeopardised.

Furthermore, Lee Brooks commented that in reality, the Trust was not seeing any positive and tangible change in relation to handover delays.

Comments:

It was queried what the Trust and other Health Boards could learn from the improvements being seen at Cardiff and Vale University Health Board. Lee Brooks stated that in Cardiff, there was no tolerance in terms of four hour delays. Jason Killens added that best practice had been shared several years ago. He added that the actions being taken at Cardiff and Vale were not without a certain risk but were done on the basis of balancing the overall clinical risk across the system. Liam Williams added that the main reason that Cardiff and Vale was having the greatest productivity benefit and subsequently reducing waiting times, was the right bed first time mantra. A dashboard in terms of bed availability was visible at all times and they clearly understood how they were performing against

their metrics. Dr Brendan Lloyd added there had been a system change, which had created an improved continuous patient flow throughout hospitals. He explained in further detail the many other initiatives and developments which had led to improved productivity and lessened waiting times.

The Board acknowledged that the Trust was undertaking all it could within its gift to improve the overall situation taking into account the lessons being learned at Cardiff and Vale.

Members held a discussion which focused on the extended waiting times for Emergency ambulances outside hospital which was having a severe impact on patients and staff alike and the Trusts' ability to respond to those patients in the community. They expressed their grave concern and deep frustration recognising that the Trust continued to do all it could within its powers.

Jason Killens added that the issues have been escalated to Welsh Government on several occasions, signalling serious concerns about the risks the Trust was carrying in its inability to respond due to delays outside hospitals. He outlined all the measures and initiatives being taken by the Trust to mitigate the delays.

An update was sought about the modelling being undertaken regarding same day emergency care (SDEC) and were there any delays in the roll out? Andy Swinburn outlined the methodology behind SDEC and what the criteria was for Trust staff to implement it. Access to SDEC was still limited from the Trust's perspective and the Trust was in the process of analysing the issues and problems.

The Board recognised that addressing the handover delays remained a priority within all Health Board's Integrated Medium Term Plans. Rachel Marsh explained there was a requirement from the Minister to complete a detailed template with one area being to specifically illustrate what actions were being taken to improve hand over delays.

Angie Lewis gave assurance that staff were updated and informed of the measures in place to reduce handover delays.

**RESOLVED: The Board noted the progress being made on the WAST actions and the ongoing impact of hospital handover lost hours.**

**26/23**

## **DUTY OF QUALITY/DUTY OF CANDOUR PREPARADNESS**

Liam Williams explained that the Health & Social Care (Quality and Engagement) (Wales) Act 2020 comes into force on 1 April 2023. The update report outlines the preparedness of the Trust to comply with the requirements of the Duty of Candour and Duty of Quality.

There have been regular Board development sessions and a further session planned for late March 2023 to outline requirements and the Trust's position. The Trust has also submitted a response to the Welsh Government Gateway Review in November 2022.

The Chair added that whilst there may be some uncertainties in terms of exactly how the legislation would be implemented and the subsequent consequences on resources against the Trust, he was confident the Trust was prepared.

Comments:

Members recognised that progress on preparedness was being closely monitored at the Quality, Patient Experience and Safety Committee (Quest).

Members queried at what point details of the Trust's obligations within the Act would be reflected in the Monthly Integrated Quality Performance Report (MIQPR). Rachel Marsh explained that some of the quality metrics had been captured in the MIQPR, however there was further work required to demonstrate the requirements of the Act.

**RESOLVED: The**

- (1) report on the Trust's preparedness for the requirements of the Health & Social Care (Quality and Engagement) Act 2020, specifically regarding the Duty of Quality and Duty of Candour was received; and**
- (2) Trust Board noted that the Trust was working towards the baseline assessment criteria as set by the Welsh Government Road Map, the first milestone for which was in April 2023 followed by September 2023.**

**27/23**

## **RISK MANAGEMENT AND BOARD ASSURANCE FRAMEWORK**

Trish Mills presented the report and reminded the Board that the 17 principal risks as described within the Board Assurance framework (BAF) were reviewed in detail at the relevant Committees.

The four highest scoring risks, 223 (the Trust's inability to reach patients in the community causing patient harm and death), 224 (Significant handover of care delays outside accident and emergency departments impacts on access to definitive care being delayed and affects the Trust's ability to provide a safe & effective service for patients), 160 (high absence rates impacting on patient safety, staff wellbeing and the Trust's ability to provide a safe and effective service) and 201 (damage to the Trust's reputation following a loss of stakeholder confidence) have been reviewed in full and the mitigating actions updated as at 22 March 2023. Trish Mills added that these risks had been given significant focus at Committee level and other settings.

It had been agreed at the last Audit Committee meeting that the owners of the higher rated risks and the Chairs of the Committee where the risks were discussed would be able to provide an update at Board.

The Board were also updated on progress with the Risk Management Transformation Programme.

Paul Hollard, Chair of the People and Culture Committee (PCC) advised that at the Committee's meetings handover delays were considered from a staff perspective. He added there was also a risk to staff from the effects of diesel fumes following prolonged waits in vehicles outside hospitals. Liam Williams added that in terms of

exposure to diesel fumes, several surveys have demonstrated that it fell below the legal limit and staff concerns were being addressed.

In terms of absence rates, the Board were advised that detailed discussions were held at each meeting which monitored figures. Angie Lewis added that current staff sickness had been the lowest since 2021. Furthermore, the Committee also considered staff suspensions.

The damage to the Trust reputation remained high; Estelle Hitchon commented that the risk to reputation centred more on the timeliness to response as opposed to the quality of the staff.

In terms of risk 260 (A significant and sustained cyber-attack on WAST, NHS Wales and interdependent networks resulting in denial of service and loss of critical systems), it was queried whether the actions remained on track. Leanne Smith advised that the current focus was on implementing an information security policy management system which will enable the Trust to monitor compliance of the actions.

The Chair advised at this time it would be prudent for Chair's of Committees to update the Board on their respective Committee activity with respect to the risks within their remit details of which was included in Committee AAA highlight reports later in the agenda.

Paul Hollard outlined details of a sexual survey, noting that detailed actions had arisen from it. It was useful to receive the Welsh Ambulance Services Partnership Team (WASPT) highlight report. A number of annual reports were received and agreed. The Committee expressed their concerns with the demands being placed on the Putting Things Right (PTR) Team; noting that support for the team had been put in place. The Committee also discussed recruitment.

In terms of the Quest Committee, Bethan Evans advised the Board that discussions continued on the impact of patients in the Community as a result of handover delays directly relevant to risks 223 and 224. The Committee heard a very powerful and impactful patient story which concerned the Trust's Wish Team providing a very memorable day for the patient and his family. The Committee spent several minutes reflecting on the meeting and how this could be developed as a regular discussion going forward. The Safeguarding annual report was received and was included in the agenda. Both the MIQPR and patient safety highlight report were received and whilst noting there was duplication it was recognised that work was ongoing to address this.

In respect of the Audit Committee, Martin Turner raised the issue of where scrutiny and challenge of the higher scoring risks took place. It was agreed that whilst the Board should spend some time discussing these risks the main scrutiny would occur at Committees. He added that a detailed discussion also took place regarding the Audit Wales structured assessment report. An area the Committee were keen to explore further involved NED challenge at Committees. Chris Turley updated the Board on the timeframe for submission of the annual accounts.

**RESOLVED: The Board:**

**(1) noted the review of Risk 223, 224, 201 and 160 including mitigating actions;**

**(2) noted the development of a suite of new risks;**

**(3) noted the update on the Risk Management Transformation Programme.**

**28/23 INTEGRATED MEDIUM TERM PLAN (IMTP) 2022-2025**

Rachel Marsh presented the report as read. It was noted that the Finance and Performance Committee had reviewed the IMTP in some detail at its March meeting and there were no further questions from the Board.

**RESOLVED: That the Board**

**(1) noted the update against WAST's IMTP Accountability Conditions; and**

**(2) noted the overall delivery of the IMTP detailed in this paper.**

**29/23 INTEGRATED MEDIUM TERM PLAN AND FINANCIAL PLAN 2023-2026**

Rachel Marsh explained that the purpose of the report was to update the Board of the progress in developing the 2023-2026 Integrated Medium Term plan in the context of NHS Wales Planning Framework and the Emergency Ambulance Services Committee (EASC) Commissioning Intentions for 2023/24.

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

- The plan set out initiatives where the patient experience and the staff workplace would be improved
- Confirmation has been received from EASC that they are content to approve the plan
- Following the last Finance and Performance Committee meeting there was a request to provide more narrative around the risks of achievability of the actions and to strengthen the section on the Duty of Quality and the Duty of Candour.
- The Board were reminded of the several mechanisms in place which allowed the Trust to ensure the plan was implemented and progressed effectively and this included the quality performance management framework.
- The plan sets out the need to transform the ambulance service whilst maintaining the balance of carrying out its business as usual.

Comments:

The Board recognised that staff comments at recent CEO WAST roadshows had, where pertinent, been incorporated into the plan.

Members discussed the plan noting the ambition and as an organisation this should be managed realistically.

The Board noted there were no surprises in the plan which was a reflection of the excellent communication throughout the year ensuring Committee and Board members were kept abreast.



Rachel Marsh presented the Trust's Purpose statement which had been developed with engagement of staff and was 'To Support, To Serve, To Save'. There was one further CEO roadshow where this would be socialised, however Board's approval for the Trust's Purpose is sought subject to any further comments at that final engagement event.

## **Financial Plan**

Chris Turley gave an overview of the plan which presented as a financial plan that would deliver a balanced revenue financial position for the Trust by the end of the 2023/24 financial year, based on some key funding and cost assumptions.

There were a number of key assumptions and risks. The plan assumed that the funding for 100 Whole Time Equivalents (WTE) would be funded which was supported by the Chief Ambulance Services Commissioner (CASC).

Another key assumption was the level of savings required which was in the region of £6m. At this stage the Trust was able to secure around £3.5m of savings. Significant work was underway to achieve these savings with full details contained in the Trust's Financial Sustainability Programme. Chris Turley added that assuming the funding for the £6m would be forthcoming, he had every confidence that a balanced plan would be achieved.

Other assumptions included the volatility of the price of fuel etc... and also any impacts from Industrial Action.

## **Comments**

Joga Singh, Chair of the Finance and Performance Committee informed the Board that a detailed discussion had taken place at the last meeting. In terms of the savings required the Trust was considering several options going forward.

Jason Killens added that a deadline for the £6m funding had been set with commissioners, essentially the end of May. Should that not be confirmed the Trust may need to consider other options regarding the 100 WTE.

Members expressed their concern in terms of staff sickness levels; Angie Lewis added that whilst the Trust's 6% target level of sickness was ambitious it was achievable.

Estelle Hitchon advised that an updated section on partnerships which was non-material, had recently been added to the plan and was not in the document being presented to the Board.

## **RESOLVED: That the Board**

- (1) agreed for the plan to be submitted to Welsh Government before the deadline of 31 March 2023;**
- (2) approved the plan subject to minor non- material alterations;**
- (3) approved the financial plan and the initial 2023/24 budget mindful it**

would change throughout the year; and

(4) approved the organisational purpose as stated.

### 30/23 STAFF STORY

Angie Lewis introduced the video in which Sandra Pollard, a Clinical Operations Manager with the NHS 111 Wales service outlined her experience at work during the industrial action period.

Sandra recalled that prior to the first industrial action management discussions were held in terms of how to best manage the service with the possibility of having a depleted workforce. This was of great concern as potentially a situation could arise whereby a lack of nurses would clearly have an effect on patient clinical safety.

In terms of preparation for the industrial action, several tactics were deployed by the team and communicated widely which enabled clinical safety to be delivered effectively. There were also good communication channels with health boards and clinical desks across Wales, proving that working in collaboration and good team work was essential.

During industrial action days the 111 management team met regularly and also provided a support network to colleagues.

From a personal perspective Sandra found the industrial action situation quite difficult, however she supported the decision made and was mindful that the NHS was seeing large numbers of staff, especially nurses, leaving the service.

Comments:

The Board welcomed the video and thanked Sandra for sharing her story in an open and honest manner; recognising the dilemma staff faced when taking the decision to strike or not.

Members reflected on staff feedback from recent CEO roadshows and WAST live events noting that the Trust had undertaken all the measures it could to help and provide support during the periods of industrial action.

Lee Brooks reiterated the sense of teamwork and the open engagement that allowed staff to provide feedback to managers which was expressed by Sandra in her video.

**RESOLVED: That the Staff story was noted.**

### 31/23 FINANCIAL PERFORMANCE MONTH 11

Chris Turley presented the report as read noting it had been presented to the Finance and Performance committee last week

He added there was a detailed update on the year- end adjustments regarding the capital schemes.

The Chair of the Finance and Performance Committee, Joga Singh advised the Trust it was on course for a balanced budget and outcome and asked the Board to record a note of thanks to Chris Turley and his team.

**RESOLVED: The Board**

- (1) Noted and gained assurance in relation to the Month 11 revenue and capital financial position and performance of the Trust as at 28 February 2023 along with current risks and mitigation plans;**
- (2) Noted the delivery of the 2022/23 savings plan as at Month 11, and the context of this within the overall financial position of the Trust;**
- (3) Noted the updated discretionary capital plan for 2022/23 year end, and**
- (4) Noted the Months 10 and 11 Welsh Government monitoring return submissions included within Appendices 1 – 4 (as required by WG).**

**32/23**

**MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT**

Rachel Marsh advised that the report had recently been presented at the last Finance and Performance Committee meeting.

In terms of highlights from the report, the following were brought to the Board's attention:

- 1) 999 call answering times had recently improved.
- 2) In terms of the 111 service, poor answering times continued. The Trust was working on measures to improve this going forward.
- 3) In respect of the clinical ring back times, these had improved significantly; all categories of callers were being rung back within the allocated time set.
- 4) There was progress on improving staff sickness levels, however PADR completion and statutory and mandatory training performance had declined.
- 5) The 15% target in terms of consult and close rate had been achieved which was positive.

Rachel Marsh added there was overall room for improvement noting that the metrics will be reviewed regularly.

Comments:

The Board noted the sickness performance and queried what the likely trajectory was going forward. Rachel Marsh explained that recruitment was underway and re-rostering work was scheduled which should see some improvement with sickness levels.

Bethan Evans, Chair of the Quest Committee assured the Board that support was provided to staff on the Putting Things Right team, which will increase when the Duty of Candour comes into force.

The Board noted that the MIQPR had been reviewed in the Board Committees, with detail of their scrutiny and oversight detailed in the respective AAA reports.

**RESOLVED: The Board considered the Integrated Quality and Performance Report and actions undertaken, and determined that the report provided sufficient assurance of performance against the indicators.**

**33/23 WELSH AMBULANCE SERVICES PARTNERSHIP TEAM (WASPT) TERMS OF REFERENCE**

Trish Mills explained the terms of reference had been discussed at the recent People and Culture Committee.

The Standing Orders at 5.8.1 provides that the main link with this group and the Board is through its executive members. However, it was felt that reporting formally to the People and Culture Committee was more effective and aligned with that Committee's responsibility to provide advice and assurance to the Board on all matters relating to partnerships and engagement, including but not limited to trade unions. It was therefore intended that an AAA report would be presented to the People and Culture Committee following each WASPT meeting and in turn that Committee will report activity to the Board.

**RESOLVED: The Board approved the WASPT terms of reference and operating arrangements including its reporting line to People and Culture Committee.**

**34/23 BOARD AND COMMITTEE REPORTS**

The following Committee highlight reports were received noting that updates had been provided earlier in the agenda under minute 27/23.

**Quest (March 2023)**

**People and Culture Committee (March 2023)**

**Audit Committee (March 2023)**

Noted that Audit Wales Annual Audit report will be discussed at a future Board Development day.

**Finance and Performance Committee (March 2023)**

**Remuneration Committee**

**Charitable Funds Committee**

**RESOLVED: The Board received the above Committee Highlight Reports and received assurance that each of the Committees had fulfilled their Terms of Reference, and that matters of concern had been escalated in line with the Alert, Advise, Assure framework of reporting**

**35/23 MINUTES OF CORPORATE BOARD OF TRUSTEES**

**The Minutes of 16 February 2023 were approved.**

**36/23 MINUTES OF COMMITTEES**

The minutes of the following open meetings were received:

1. Quest Committee – 10 November 2022.
2. People and Culture Committee – 29 November 2022
3. Audit Committee – 1 December 2022
4. Finance and Performance Committee – 16 January 2023.

Furthermore the following NHS Wales Joint Committee update reports were received

1. Emergency Ambulance Services Committee (EASC) meeting and EASC Chair Summary of 7 January.
2. SSPC Assurance report 19 January 2023
3. WHSCC Briefings dated, 10 January 2023, 17 January 2023, 13 February 2023 and 14 March 2023.

**RESOLVED: That the above minutes and update reports were received.**

**37/23 ANY OTHER BUSINESS**

None

**EXCLUSION OF THE PRESS AND MEMBERS OF THE PUBLIC – 30 MARCH 2023**

Members of the Press and Public were invited to leave the meeting because of the confidential nature of the business about to be transacted (pursuant to Section 1(2) of the Public Bodies (Admission to Meetings) Act 1960).

**RESOLVED: The Board would meet in private on 30 March 2023.**

**Meeting closed at 12:30**

**Date of next Open meeting: 25 May 2023**