



**EMERGENCY AMBULANCE SERVICES
JOINT COMMITTEE MEETING**

**'CONFIRMED' MINUTES OF THE MEETING HELD ON
12 NOVEMBER 2019 AT THE NATIONAL COLLABORATIVE
COMMISSIONING UNIT, TREForest INDUSTRIAL ESTATE**

PRESENT

Members	
Chris Turner	Independent Chair
Stephen Harrhy	Chief Ambulance Services Commissioner
Gary Doherty (Via VC)	Chief Executive, Betsi Cadwaladr BCUHB
Sian Harrop-Griffiths	Director of Planning, Swansea Bay SBUHB
Steve Moore	Chief Executive, Hywel Dda HDdUHB
Jamie Marchant	Director of Primary Care, Community and Mental Health, Powys PTHB
Sharon Hopkins	Chief Executive, Cwm Taf Morgannwg CTMUHB
Judith Paget	Chief Executive, Aneurin Bevan ABUHB
In Attendance:	
Steve Curry	Chief Operating Officer, Cardiff and Vale C&VUHB
Rachel Marsh	Director of Planning, Welsh Ambulance Services NHS Trust
Julian Baker	Director, National Collaborative Commissioning Unit
Shane Mills	Deputy Chief Ambulance Services Commissioner and Director of Quality and Patient Experience
James Rodaway	Head of Commissioning & Performance Management
Ross Whitehead	Assistant Director of Quality and Patient Experience
Jo Mower	Clinical Director National Programme Unscheduled Care (in part)
Stuart Davies	Director of Finance, WHSSC and EASC Joint Committees
Gwenan Roberts	Head of Corporate Services, Cwm Taf Morgannwg UHB (Secretariat)
Chris Polden	ORH Consulting (in part)
Chris Moreton	Head of Finance, National Collaborative Commissioning Unit (Observing)

Part 1. PRELIMINARY MATTERS		ACTION
EASC 19/88	<p>WELCOME AND INTRODUCTIONS</p> <p>Chris Turner (Chair), welcomed Members to the meeting of the Emergency Ambulance Services Committee and those present introduced themselves.</p>	

AGENDA ITEM 1.4

EASC 19/89	<p>APOLOGIES FOR ABSENCE Apologies for absence were received from Judith Paget, Glyn Jones, Georgina Galletly, Steve Ham, Anthony Hayward and Tracey Cooper.</p>	
EASC 19/90	<p>DECLARATIONS OF INTERESTS There were no additional interests to those already declared.</p>	Chair
EASC 19/91	<p>MINUTES OF THE MEETING HELD ON 23 JULY 2019 The minutes were confirmed as an accurate record of the meeting held on 23 July 2019.</p>	Chair
EASC 19/92	<p>ACTION LOG Members RECEIVED the action log and NOTED progress as follows:</p> <p>EASC 18/06 & EASC 18/65 & EASC 19/21 The development of local measures had been piloted at ABUHB and a report of progress would be provided as soon as possible to the EASC Management Group.</p> <p>EASC 19/08 & EASC 19/21 & EASC 19/23 Emergency Medical Retrieval Service (EMRTS) Refresh of the commissioning framework A further update would be provided at the next meeting.</p> <p>EASC 19/42 Ambulance Quality Indicators (AQIs) Trend analysis had been included in the latest version of the AQIs.</p> <p>EASC 19/55 Management Group A number of further comments had been received on the Terms of Reference which would be discussed at the next management group. The final version would be circulated as well as the dates for future meetings of the management group.</p> <p>EASC 19/55 Mental Health An update of progress to date was provided, it was agreed to share information in relation to the composition of the expert advisory group and a further update would be provided at the next meeting.</p>	<p>James Rodaway</p> <p>James Rodaway</p> <p>CASC</p> <p>Shane Mills and Carol Shillabeer</p>

	<p>EASC 19/77 WAST Staff Pipeline WAST had not yet received a response from the provider in relation to the relatively high number of re-sits. A further update would be provided at the next meeting.</p> <p>Handover Delays WAST confirmed that meetings were taking place with health boards in relation to handover delays meeting and escalation arrangements. Further information would be provided at the next meeting in relation to how this would work and the proposals for supporting the cohorting of patients.</p> <p>RED improvement plan Activity had increased and a copy of the plan would be shared with health boards.</p> <p>Good SAM app The Good SAM app had been shared by medical directors and it was agreed to close the action.</p> <p>EASC 19/78 Reference Document on the WAST Relief Gap Emergency Ambulance Service Jason Killens confirmed that he was working on providing a response to the information; this would be received at the next meeting of the Committee in relation to the critical path to meet the commissioning intentions.</p>	<p>Jason Killens</p> <p>Jason Killens</p> <p>Jason Killens</p> <p>Jason Killens</p>
<p>EASC 19/93</p>	<p>MATTERS ARISING</p> <p>There were none.</p>	
<p>EASC 19/94</p>	<p>CHAIR'S REPORT</p> <p>The Chairs report was received by Members. In presenting the report, Chris Turner highlighted his key meetings which had taken place since the last meeting of the Committee.</p> <p>Members NOTED that the Chair had been appointed for a further year and reiterated the opportunity for Members to raise and issues or provide feedback on the effectiveness of the work of the committee.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Chair's Report. 	<p>Chair</p>

<p>EASC 19/95</p>	<p>ORH DEMAND AND CAPACITY REVIEW</p> <p>Members received the initial findings of the independent emergency medical service Demand and Capacity Review in a private session. Further work would now be discussed at the Demand and Capacity Steering Group and within the Management Group to provide more analysis on the information presented and the identification of the overall efficiencies which could be made in the system.</p> <p>A long discussion took place on the efficiency assumptions included within the Review. Committee members confirmed their support for safe co-horting of patients, particularly in those hospitals that are currently experiencing the highest level of lost hours. Committee members also wanted to ensure that the impact on the whole system was being measured and understood, in order to reduce overall system risk.</p> <p>Reference was also made to the WAST winter plan, and the need to understand the key actions being taken by WAST and net impact of the plan for the system and ambulance performance.</p> <p>Given the immediate need for red performance improvement, with the minimum expectation of achieving 65% at a national level for November the Welsh Ambulance Services NHS Trust were asked to update the Chief Ambulance Services Commissioner on ongoing initiatives and action and a wider assessment of the plans on wider system performance by the following week.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the initial findings • Seek further clarity at the Management Group in line with the queries identified • Receive the final version of the report at the next meeting. 	
<p>EASC 19/96</p>	<p>CHIEF AMBULANCE SERVICES COMMISSIONER'S REPORT</p> <p>The Chief Ambulance Services Commissioners (CASC) report was received by the Committee.</p> <p>Members NOTED that slippage had been held back on non recurrent funding for:</p> <ul style="list-style-type: none"> • Extra clinical staff in the clinical control centres • Enhanced transfer and discharge service and extend use of the St John Cymru Wales service 	<p>CASC</p>

	<ul style="list-style-type: none"> • Additional front line staff via the following schemes <ul style="list-style-type: none"> - encouraging retire and return - providing more hours part time staff working additional hours - more opportunities for bank staff to become permanent members of staff. <p>Members NOTED that the whole time equivalent (WTE) which could be achieved by January 2020 was 46WTE to be funded non-recurrently from 'A Healthier Wales' allocation. It was noted that the staff would not be permanent but there was sufficient slippage to cover the costs incurred. Funding would be provided on evidence that additional spend had taken place.</p> <ul style="list-style-type: none"> • Emergency Medical Retrieval and Transfer Service (EMRTS) Gateway review Members noted that information in relation to the review was now expected no later than the end of January 2020. • Management Group The schedule of meetings and the terms of reference would be shared with the Members. • RED Performance requirements The update report was included in the WAST provider report received. EASC members were very concerned that, although the provider report indicated red performance continued to exceed 65%, doubts were raised about the ability to achieve this in November. • AMBER Review The Amber Review Implementation Programme is due to be completed at the end of November 2019. An end of programme review will be undertaken. Discussions are ongoing around the outstanding actions and the next steps. • Update on Mental Health Staff Clinical Desk The Mental Health access review, due to report in early 2020, is moving into a data collection phase in winter 2019, with three Police forces, 111, general practitioner out of hours services (GPOoH), the Welsh Ambulance Services NHS Trust (WAST), frequent attenders, I CAN (https://awyrlas.org.uk/ican - I CAN is a campaign to improve the support available to people with mental health problems) and emergency departments all collecting the same information for 2 months. 	<p>CASC</p> <p>Carol Shillabeer</p>
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<p>EASC 19/97</p>	<p>WELSH AMBULANCE SERVICES NHS TRUST (WAST) PROVIDER UPDATE</p> <p>The Welsh Ambulance Services NHS Trust team (WAST) gave an overview of the following areas; Members NOTED:</p> <ul style="list-style-type: none"> • Serious Adverse incidents (SAI) – being reviewed at the Serious Case Incident Forum; latest information showed that 80% of incidents were at Aneurin Bevan and Swansea Bay UHB areas; additional information was requested in terms of the common themes of the SAIs (in more detail than handover delays) which would be reported to the Welsh Government • Coroners Activity: since January 2019 a further 207 requests for information have been received • Longest Waits: regular reviews been undertaken and a table of waits over 12 hours included; numbers were worsening although the longest waits were reducing • Demand: increasing by 1.56% overall but in the red category by 7.5%; this needed to be further analysed • Red Performance: maintained about the 65% national target but variation in performance in Hywel Dda and Powys health board areas • Amber response times / Amber Review: Strong correlation between Amber waits, resource allocation and notification to handover lost hours; internal WAST Amber Delivery Group established • Handover lost hours = 12% of available resources daily • Winter Planning: reported that WAST had been working on its tactical winter plans over last 6 months • Resources: working with ORH on Demand and Capacity Review to clearly identify the gap between the budgeted establishment and the number of staff to fill rosters • Service Changes: the launch of the South Wales and South Powys Major Trauma network and its significance for the WAST service • All Wales Transfer and Discharge Service: there remains a commitment to develop a single all Wales service and to be included in commissioning intentions • Electronic patient clinical records: outline business case submitted to the Welsh Government in June 2019 • IMTP 2020/2023: will be submitted to the EASC at the January 2020 meeting. <p>Members NOTED the work in relation to winter planning undertaken. Members identified some inaccuracies in the information and agreed to discuss with the WAST team outside of the meeting.</p>	<p>Jason Killens</p>
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	<p>Red call and triage categorisation was discussed in detail and Members felt it was important to better understand the reasons, Rachel Marsh agreed to provide further information from a deep dive as soon as possible. Each health board area felt it would be most beneficial to receive locality based information.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the update from the provider service • Receive further information from a deep dive on red call and triage categorisation. 	<p>Members</p> <p>Rachel Marsh</p>
<p>EASC 19/98</p>	<p>PROGRESS REPORT ON NON-EMERGENCY PATIENT TRANSPORT SERVICES (NEPTS)</p> <p>The progress report on NEPTS was received which was presented by James Rodaway. Members noted that the collaborative approach planned was being delivered with positive progress; a story board was also planned to include within the integrated medium term plan.</p> <p>Members were reminded of the initial internal audit report limited assurance findings and the potential to re audit in the future. Members noted that it was anticipated that all health boards would be involved by the end of the financial year.</p> <p>The report outlined the good progress made and the work currently underway to transform Non-Emergency Patient Transport Services in Wales; deliver the Ministerial expectations and implement the 2015 business case "the Future of NEPTS in Wales".</p> <p>Members RESOLVED to: NOTE the report.</p>	
<p>EASC 19/99</p>	<p>REGIONAL ESCALATION</p> <p>Stephen Harchy provided an oral update on the work in relation to regional escalation and discussed the options available.</p> <p>Members noted that handover delays had significantly increased over the past 12 months from a baseline of 4,500hours lost per month to over 8,000 and were continuing to increase. Each health board areas had different issues and pressures to manage and Members NOTED that relationships between handover delays, staff availability, activity and ambulance performance. The safe cohorting of patients was discussed at length, it was agreed that this should be discussed at the Chief Operating Officers meeting along with proposals for changing regional escalation arrangements.</p>	

<p>EASC 19/100</p>	<p>DEVELOPING A NATIONAL EMERGENCY DEPARTMENT QUALITY AND DELIVERY FRAMEWORK (EDQDF) FOR THE NHS IN WALES</p> <p>Dr Jo Mower gave a presentation on the development of the EDQDF and the phases undertaken to date. Members thanked Jo Mower and Julian Baker for their work to date and felt that the story board was very useful to provide a support of the work and highlight the next phase. Members were offered the opportunity of receiving health board specific sessions if required.</p> <p>A wider based discussion took place on unscheduled care following the presentation and the following issues were noted:</p> <ul style="list-style-type: none"> • Clear actions agreed from the last workshop (good representation at workshop) • Clear on the actions for escalation • Flexible deployment of ambulances • Need for regional actions • Need to address local issues in house • Importance of reliable data • The impact of the Welsh Government meeting on the repatriation of patients • Aim to capture information in particular for areas agreed <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the presentation • Thank the team for their work to date and receive a further update on progress in the summer of 2020. 	<p>Julian Baker</p>
<p>EASC 19/100</p>	<p>FINANCE REPORT</p> <p>Members received the Finance Report which was presented by Stuart Davies and breakeven position.</p> <p>Members NOTED the plan to use the underspend and how the WAST resources would be deployed and looking at how the work could be completed by the end of January.</p> <p>Members NOTED that the allocation of the 'A Healthier Wales' 1% funding and would be provided in detail to the Management Group.</p> <p>Members RESOLVED to: NOTE the report.</p>	<p>Stuart Davies</p>

<p>EASC 19/102</p>	<p>AMBULANCE QUALITY INDICATORS</p> <p>The Committee received the report on Ambulance Quality Indicators (AQIs).</p> <p>In presenting the report, Ross Whitehead gave an overview of the key issues which had also been discussed earlier in the meeting including call answering times, conveyance attendances, red performance and handover delays. Members noted that the WAST team were discussing specific issues with the health boards directly.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the overview of the last quarter’s AQIs. 	<p>Ross Whitehead</p>
<p>EASC 19/103</p>	<p>EASC GOVERNANCE UPDATE</p> <p>The governance update report was received and presented by Gwenan Roberts.</p> <p>Members NOTED the following:</p> <ul style="list-style-type: none"> • Officers at the Welsh Government had been revising the model Standing Orders for health board, NHS Trusts and the Welsh Health Specialised Services Committee circulated as a Welsh Health Circular WHC 2019/027 • Model Standing Orders had been produced for EASC for the first time and were presented to the Committee for endorsement and onward adoption at each health board • All health boards were required to incorporate and adopt the latest review into each local health board Standing Orders to form Schedule 4.2 • Previous direction from the Minister in relation to changes to voting arrangements and the importance of all health board to provide the name of the nominated deputies for the Committee. • Model Standing Financial Instructions were being reviewed by a task and finish group led by the Directors of Finance and would be presented to the Committee in the final draft stage. • The Cwm Taf Morgannwg would continue to host the EAS Committee and support the reporting through the CTMUHB Quality and Safety Committee and the CTMUHB Audit and Risk Committee. • The revisions, supporting appendices and glossary to the Standing Orders • The Risk Register would be reviewed in detail following the discussion at the development session for presentation early in 2020. 	<p>All</p> <p>Stuart Davies</p> <p>James Rodaway</p>

	<p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • ENDORSE the model Standing Orders for approval at all health boards to meet the requirements of the Welsh Health Circular. 	
<p>EASC 19/103</p>	<p>ALIGNMENT OF EASC COMMISSIONING INTENTIONS WITH INTEGRATED MEDIUM TERM PLANS (IMTPs)</p> <p>Members received the report and a presentation on the Commissioning Intentions.</p> <p>Members noted the approach was in line with the NHS Planning Framework and An All-Wales Review of NHS IMTPs for 2019–22 referenced the positive observations around the collaborative commissioning arrangements for EASC. Members discussed the lessons learned and that the detail would be discussed at the EASC Management Group.</p> <p>The proposed approach to the Commissioning Intentions for EASC commissioned services and their alignment with Welsh Ambulance Services NHS Trust (WAST) and Health Board Integrated Medium Term Plans (IMTPs) was discussed in detail. Financial assumptions were discussed and the level of recurrent funds that would be made available would be consistent with the allocation letter when issued. A non recurrent sum would need to be reserved to support the transitional changes required from WAST. This would be confirmed in due course.</p> <p>It was AGREED that the Chief Ambulance Services Commissioner write to the Chief Executive at WAST as soon as possible clarifying the commissioning intentions of EASC for the next year.</p> <p>Following discussion Members RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the proposed approach to the Commissioning Intentions for EASC commissioned services and their alignment with Welsh Ambulance Services NHS Trust (WAST) and Health Board Integrated Medium Term Plans (IMTPs). • ENDORSE the content of presentation on the 2020/21 Commissioning Intentions. 	

AGENDA ITEM 1.4

EASC 19/104	<p>FORWARD PLAN OF BUSINESS</p> <p>Members received the forward plan of business which will need to include and annual plan and IMTP approval.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Forward Plan • AGREE that the Chair and the Chief Ambulance Services Commissioner review the Forward Plan for future meeting. 	<i>ALL</i>
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ANY OTHER BUSINESS		
EASC 19/105	There was none.	
DATE AND TIME OF NEXT MEETING		
EASC 19/106	A meeting of the Joint Committee would be held at 13:30 hrs, on Tuesday 28 January 2020 at the Welsh Health Specialised Services Committee (WHSSC), Unit G1, The Willowford, Main Ave, Treforest Industrial Estate, Pontypridd CF37 5YL.	Committee Secretary

Signed
Christopher Turner (Chair)

Date