



**EMERGENCY AMBULANCE SERVICES
JOINT COMMITTEE MEETING**

**'UNCONFIRMED' MINUTES OF THE MEETING HELD ON
28 JANUARY 2020 AT THE WHSSC, UNIT G1, THE WILLOWFORD,
MAIN AVE, TREForest INDUSTRIAL ESTATE,
PONTYPRIDD CF37 5YL**

PRESENT

Members:	
Chris Turner	Independent Chair
Stephen Harray	Chief Ambulance Services Commissioner
Judith Paget (Via VC)	Chief Executive, Aneurin Bevan ABUHB
Gary Doherty	Chief Executive, Betsi Cadwaladr BCUHB
Len Richards	Chief Executive, Cardiff and Vale C&VUHB
Sharon Hopkins	Chief Executive, Cwm Taf Morgannwg CTMUHB
Steve Moore	Chief Executive, Hywel Dda HDdUHB
Carol Shillabeer	Chief Executive, Powys PTHB
Tracy Myhill	Chief Executive, Swansea Bay SBUHB
In Attendance:	
Simon Dean	Deputy Chief Executive NHS Wales
Jason Killens	Chief Executive, Welsh Ambulance Services NHS Trust
Stuart Davies	Director of Finance, Welsh Health Specialised Services Committee (WHSSC) and EASC Joint Committees
Julian Baker	Director, National Collaborative Commissioning Unit
Jo Mower	Clinical Director, National Programme Unscheduled Care
James Rodaway	Head of Commissioning & Performance Management
Ross Whitehead	Assistant Director of Quality and Patient Experience
Chris Moreton	Head of Finance, National Collaborative Commissioning Unit
Rachel Marsh	Director of Planning, Strategy and Performance, Welsh Ambulance Services NHS Trust
Andy Haywood	Director of Digital, Welsh Ambulance Services NHS Trust (Observing)
Gwenan Roberts	Assistant Director Corporate, National Collaborative Commissioning Unit (NCCU) (Secretariat)
Jonathan Jones	Project Lead EASC National Collaborative Commissioning Unit (Observing)

Part 1. PRELIMINARY MATTERS		ACTION
EASC 20/01	<p>WELCOME AND INTRODUCTIONS</p> <p>Chris Turner (Chair), welcomed Members to the meeting of the Emergency Ambulance Services Committee (EASC) and particularly Simon Dean, Deputy Chief Executive of NHS Wales.</p> <p>The Chair welcomed Andy Haywood, newly appointed Director of Digital from the Welsh Ambulance Services NHS Trust and Jonathan Jones, Project Lead for EASC, National Collaborative Commissioning Unit who were observing the meeting.</p> <p>Gwenan Roberts was also welcomed to the meeting in the new role of Committee Secretary to EASC.</p>	
EASC 20/02	<p>APOLOGIES FOR ABSENCE</p> <p>There were no apologies for absence received at the meeting.</p>	
EASC 20/03	<p>DECLARATIONS OF INTERESTS</p> <p>There were no additional interests to those already declared.</p>	Chair
EASC 20/04	<p>MINUTES OF THE MEETING HELD ON 12 NOVEMBER 2019</p> <p>The minutes were confirmed as an accurate record of the meeting held on 12 November 2019 subject to an amendment on the item for the Emergency Department Quality and Delivery Framework and the following discussion in relation to Unscheduled Care.</p>	Chair
EASC 20/05	<p>ACTION LOG</p> <p>Members RECEIVED the action log and NOTED progress as follows:</p> <p>EASC 18/06 & EASC 18/65 & EASC 19/21 Integrated Performance Dashboard Members noted that the development of local measures had been piloted at ABUHB and a report on 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 Members noted the progress in developing the framework and an update would be provided at the next meeting.</p>	<p>James Rodaway</p> <p>James Rodaway</p>

Ross
Whitehead

EASC 19/42 Ambulance Quality Indicators (AQIs)

Members noted that the next release of the AQIs would take place on 29 January 2020 and they would be formally received at the next meeting.

EASC 19/77 WAST Staff Pipeline

Jason Killens explained that the provider had reviewed the number of resits and he had been reassured that, although a number of issues had been identified, there were no common themes or ongoing concerns.

Handover Delays

Jason Killens confirmed that the actions identified had been included in the WAST winter plan:

- Procuring services from 3rd sector / or provide more unscheduled care staff
- Review the skill mix within the clinical control centres
- Support emergency departments by making appropriate staff available.

Members noted that the pilot to safely cohort patients had started in the Princess of Wales Hospital and was due to start in Aneurin Bevan ABUHB on 3 February 2020. Local work was also taking place at Ysbyty Glan Clwyd and the scheme at the Morryston Hospital was currently being procured.

RED improvement plan

Jason Killens confirmed that a copy of the plan had been shared with health boards.

EASC 19/78

Reference Document on the WAST Relief Gap Emergency Ambulance Service

Information was provided as part of the WAST Provider update.

EASC 19/82 & 19/99

Regional Escalation

Jason Killens confirmed that a meeting had taken place and a head of terms developed and circulated. Members noted that an operational procedure based on the head of terms had been developed and the revised arrangement had gone live on 27 January 2020.

EASC 19/97

Serious Adverse incidents (SAI) and red call categorisation

Information was provided as part of the WAST Provider update.

<p>EASC 20/06</p>	<p>MATTERS ARISING</p> <p>There were none.</p>	
<p>EASC 20/07</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. Members noted that the Chair's appraisal had been positive with the Minister and objectives agreed.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Chair's Report. 	
<p>EASC 20/08</p>	<p>EASC INTEGRATED MEDIUM TERM PLAN (IMTP)</p> <p>The draft National Collaborative Commissioning Unit NCCU IMTP was received by the Committee. Stephen Harray gave an overview of the report and emphasised that the Members were asked to approve the EASC element of the plan and note any implications for EASC contained in the wider plan. Members were also informed of the financial discussions to date.</p> <p>In relation to the financial position, and following discussion, Members agreed:</p> <ul style="list-style-type: none"> • WAST IMTP figures for 2020/21 would be consistent with the details set out in the Welsh Government allocation letter • Health Boards agreed in principle to fund up to a maximum of £1.8m in additional revenue on a non-recurrent basis for 2020/21. This was the amount that Members would expect to be reflected in the WAST IMTP and presented as such. The draw down from this funding would be made conditional on the delivery of resources in line with the delivery plan and would be provided to WAST when the expenditure had been incurred. • The agreement in principle was subject to a detailed implementation/delivery plan being signed off which should include, at both a national level and by health board level, a suite of benefits measures / key performance indicators that demonstrated how the additional funding would be linked to improved outcomes. <p>James Rodaway provided Members with a high level overview of the content of the plan which had been developed in line with the commissioning intentions previously approved. Members noted that the supporting appendix had been developed for inclusion in health board IMTPs to ensure consistency and alignment.</p>	

	<p>James Rodaway was thanked for the work taken to prepare the plan.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the EASC element of the NCCU IMTP. • APPROVE the financial information, subject to the agreed principles above. 	
<p>EASC 20/09</p>	<p>DEMAND AND CAPACITY REVIEW (FINAL)</p> <p>The final version of the Demand and Capacity Review by ORH was received. Stephen Harray reminded Members of the work to date and thanked the team at WAST for the cooperation and commitment to work together to deliver the final report. Members noted the high quality of the report and the importance of the next steps in terms of the implementation stage as this would also be subject to the scrutiny of the Ministerial Ambulance Availability Taskforce.</p> <p>Members were aware that the information had been included in the IMTP and clear recommendations for implementation on a health board by health board basis. Members noted some minor adjustments needed to be made to local data and this would be resolved outside of the meeting.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the ORH Demand and Capacity Review • NOTED that the implementation would be managed through the EASC Management Group and the work was included also in the terms of reference of the Ministerial Ambulance Availability Taskforce. 	<p>CASC</p>
<p>EASC 20/10</p>	<p>LETTER OF SUPPORT FOR THE WELSH AMBULANCE SERVICES NHS TRUST INTEGRATED MEDIUM TERM PLAN</p> <p>The Chief Ambulance Services Commissioner (CASC) informed Members that in relation to the WAST IMTP the content had been discussed and scrutinised; it was consistent with the previously agreed commissioning intentions. Members noted that they had received the latest version of the WAST IMTP by email on the morning of the meeting and Rachel Marsh suggested that Section 4 of the WAST IMTP provided a helpful two page overview of the key deliverables in terms of outcome measures for patients and staff.</p> <p>In line with the previous discussions related to finance Members noted that the CASC would formally write to support the WAST IMTP on behalf of EASC.</p>	

	<p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE a letter be sent by the CASC to WAST and shared with Members as soon as possible. 	CASC
EASC 20/11	<p>FORWARD PLAN OF BUSINESS</p> <p>The forward plan of business was received. Members discussed the arrangements for the Committee and agreed that it would be helpful to have an annual report for the sub groups as well as the Committee itself.</p> <p>The Chair asked Members for their views regarding the Development Sessions and it was agreed that, unless urgent business required otherwise, an hour be set aside at each meeting for detailed discussions on a specific issue. Members noted that further work would take place to plan the agenda in line with the issues within the IMTP.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE that the Chair and the Chief Ambulance Services Commissioner further review the Forward Plan for future meeting in line with the discussions held. 	<p>Sub Group leads</p> <p>Chair / CASC</p>
EASC 20/12	<p>CHIEF AMBULANCE SERVICES COMMISSIONER'S (CASC) REPORT</p> <p>The CASC report was received and in presenting the report Stephen Harry highlighted key areas which included:</p> <ul style="list-style-type: none"> • National Transfer Service for Critically Ill Adults – Members noted that the key issue would be ensuring medical cover was available for the service. • Ministerial Ambulance Availability Task Force – Members were aware of the work to date and noted the 5 key elements that had been included in the Ministers written statement <ul style="list-style-type: none"> - Implementation of recommendations from a recently commissioned independent "Demand and Capacity" review - rapid delivery of alternative pathways and community-based solutions to prevent avoidable conveyance to emergency departments - optimisation of the ambulance patient handover process - improvement in Red performance, and - build on progress made by the Amber Review Implementation Programme. 	

	<ul style="list-style-type: none"> • Members noted that work was underway to finalise the terms of reference for the Taskforce which would be shared as soon as possible. • Members suggested that the communications in relation to the work of the Taskforce would be crucial for the service. • It was confirmed that wherever possible existing governance mechanisms would be used. There was a specific discussion on clinical governance and whether a separate group was required. This was currently being considered and Members would be kept up to date on progress • Ambulance Quality Indicators (AQIs) – Members noted that the next release of AQIs would take place on 29 January and an indication was given of the anticipated position in relation to lost hours at handover and the deterioration in red and amber performance. • Performance dashboard – Members noted that work was continuing on extending the local measures. • EMRTS: Gateway Review and progress on review of commissioning framework – Members noted that the Air Ambulance charity was experiencing difficulties in recruiting additional pilots for 24/7 working due to a national shortage. The Chair of EASC and the CASC would be meeting with the charity to discuss the situation in the next few weeks and would report back at the next meeting. • Mental Health update – Carol Shillabeer gave an update on progress in relation to working with the Police and the categorisation of mental health calls to its service. Members noted that the diversity of calls and that helpful data was being collected for further analysis. The work would continue to seek a Once for Wales solution and would be considered by the Ministerial Ambulance Availability Taskforce. <p>Jason Killens drew attention to section 2.3.3 of the report in relation to the altered practices in the Clinical Contact Centre. Members noted that the International Academies of Emergency Dispatch had worked with WAST to review the ‘breathing problem – card 6’ which had meant that some activity had been rebased from Amber to Red; the impact was approximately 2% from 5% to 7%.</p>	<p>CASC</p> <p>Ross Whitehead</p> <p>Chair & CASC</p> <p>Carol Shillabeer</p>
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	<p>Members noted that two triage tools were available on the market and the vast majority of ambulance services used the Medical Priority Dispatch System as opposed to the NHS Pathways tool. WAST were an accredited centre of excellence for the MPDS.</p> <p>It was confirmed that from a governance point of view the correct actions had been taken. Members asked about the impact on patient outcomes and whether these had improved as a result. Jason Killens agreed to provide the research from the provider and explore this matter further. Members suggested that the EASC Management Group receive the information in the first instance.</p> <p>Jason Killens also updated Members on the quantum of post-production hours lost (e.g. relating to meal breaks) and the ongoing work within WAST, where a group were due to report to a Committee of the NHS Trust. A pilot scheme was planned for the Swansea area and success criteria had been developed to measure the change. This was an integral part of the implementation of the Demand and Capacity review. Members also noted that the fleet mix would need to be changed.</p> <p>Following discussion, Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Chief Ambulance Services Commissioners update report. 	<p>EASC Mgt Group</p>
<p>EASC 20/13</p>	<p>WELSH AMBULANCE SERVICES NHS TRUST (WAST) PROVIDER REPORT</p> <p>The update report from the WAST was received and in presenting the report Jason Killens highlighted key areas which included:</p> <ul style="list-style-type: none"> • Performance – it was expected that red performance in January would be slightly higher than the All Wales target of 65% which would be an improvement from the previous two months. Members noted that red call demand was less in January than December 2019. • Serious Adverse Incidents (SAIs) – Members were concerned to note that increased levels of harm had been recorded primarily in two health board areas. A small team from EASC was meeting with staff from WAST to further review SAIs and applying thresholds across Wales and this would be considered further at the EASC Management Group. 	<p>EASC Mgt Group</p>

	<ul style="list-style-type: none"> Recruitment – WAST were aiming in their IMTP to increase staffing levels by a minimum of 136 with the vast majority being in post by the end of quarter 3. Members noted that service changes, such as the commissioning of the new Grange University Hospital, potential changes to A&E departments and vascular services within NHS Wales, would potentially raise the number beyond 136 and that this would require extra training capacity being secured by WAST. However, the difficulties that had been experienced in recruiting staff in the numbers planned to date were noted. Commissioning Intentions – Members received the report and noted that the EASC Management Group would be developing a detailed delivery plan for the commissioning intentions and the recommendations from the Demand and Capacity Review. <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> NOTE the WAST Provider Report NOTE the WAST response to the Commissioning Intentions and the work at the EASC Management Group 	<p>EASC Mgt Group</p>
<p>EASC 20/14</p>	<p>NON-EMERGENCY PATIENT TRANSPORT SERVICE (NEPTS) PROGRESS REPORT</p> <p>The progress report in relation to the NEPT service was received. James Rodaway presented the report. Members noted that the Quality and Delivery Framework had been in place since October 2019 and that good representation from all health boards had been seen at the NEPTS Delivery Assurance Group which monitored the progress against the Framework and the commissioning intentions.</p> <p>Work was continuing on improving efficiency in terms of the operational practice. Members noted that a quarter of bookings were still being sent by Fax and a large number of appointments were booked on the day. Members noted that every provider was quality assured and Members felt it was a positive improvement and noted that plans were in place for the roll out across all health board areas.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> NOTE the update on the NEPT Service. 	
<p>EASC 20/15</p>	<p>FINANCE REPORT</p> <p>Members received the Finance Report which was presented by Stuart Davies and indicated a breakeven position.</p>	

AGENDA ITEM 1.4

	<p>Members were informed that a possible underspend on 'A Healthier Wales' 1% allocation had been identified and would be quantified by the end of February.</p> <p>Members RESOLVED to: NOTE the report.</p>	Stuart Davies
EASC 20/16	<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"> • A new format for the reports had been received by the Members which mirrored the approach of the host body • The Risk Register would be reviewed in detail in line with the changing arrangements at the host body and progress would be presented at the next meeting • The evaluation of the sub groups would be presented at the next meeting; Members felt that the Committee itself should also receive an annual report in order to assess efficiency of the arrangements and assist in planning for the future. <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Governance Update 	<p>Committee Secretary</p> <p>Sub Group leads Committee Secretary</p>

ANY OTHER BUSINESS		
EASC 20/18	There was none.	
EASC 20/19	<p>Private Session</p> <p>Members held a private session to receive the minutes from the In Committee meeting held on 12 November 2019.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • APPROVE the minutes of the In Committee meeting held on 12 November 2019. 	
DATE AND TIME OF NEXT MEETING		
EASC 20/19	A meeting of the Joint Committee would be held at 09:30 hrs, on Tuesday 10 March 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