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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Meeting Date	24 January 2019	Agenda Item	7a
Report Title	Hosted Agencies Governance Sub-Committee Minutes		
Report Author	Claire Mulcahy, Committee Services Officer		
Report Sponsor	Pam Wenger, Director of Corporate Governance		
Presented by	Pam Wenger, Director of Corporate Governance		
Freedom of Information	Open		
Purpose of the Report	The purpose of the report is to set out the recent minutes for the Delivery Unit and Emergency Medical Retrieval and Transfer Service (EMRTS) governance sub-committees.		
Key Issues	There are no significant issues to bring to the committee's attention.		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
	✓		
Recommendations	Members are asked to : <ul style="list-style-type: none"> • Note the report and the appended minutes. 		

MINUTES OF THE HOSTED AGENCIES GOVERNANCE SUB-COMMITTEE

1. INTRODUCTION

This report sets out the recent minutes for the Delivery Unit and Emergency Medical Retrieval and Transfer Service (EMRTS) governance sub-committees.

2. BACKGROUND

To observe good governance, sub-committees were established to provide assurance to the board, through the Audit Committee, of any services hosted by ABMU. There are currently two hosted agency governance sub-committees; the Delivery Unit and EMRTS.

3. GOVERNANCE AND RISK ISSUES

As sub-committees to the Audit Committee, minutes are presented to the committee for assurance on a regular basis and those for the recent meetings are at **appendix one** (Delivery Unit – 5th October 2018) and **appendix two** (EMRTS – 5th October 2018).

4. FINANCIAL IMPLICATIONS

There are no financial implications for the committee to consider.

5. RECOMMENDATION

Members are asked to:

- **Note** the report and the appended minutes.

Governance and Assurance					
Link to corporate objectives (please ✓)	Promoting and enabling healthier communities	Delivering excellent patient outcomes, experience and access	Demonstrating value and sustainability	Securing a fully engaged skilled workforce	Embedding effective governance and partnerships
					✓
Quality, Safety and Patient Experience					
Ensuring the sub-committees carry out their business appropriately and aligned with standing orders is a key factor in the quality, safety and experience of patients receiving care.					
Financial Implications					
No financial implications for the committee to be aware of.					
Legal Implications (including equality and diversity assessment)					
It is essential that the sub-committees comply with its standing orders, for which its responsibilities are outlined in their terms of reference.					
Staffing Implications					
No staffing implications for the committee to be aware of.					
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)					
No implications for the committee to be aware of.					
Report History	The hosted agencies governance sub-committee minutes are received by the committee following each meeting for information.				
Appendices	Appendix one – minutes of the meeting of the Delivery Unit Governance Sub-Committee on 5 th October 2018 Appendix two - minutes of the meeting of the EMRTS Governance Sub-Committee on 5 th October 2018				

ABMU HEALTH BOARD
UNCONFIRMED
MINUTES OF THE DELIVERY UNIT GOVERNANCE SUB-COMMITTEE
HELD ON 5TH OCTOBER 2018 AT 3.00PM
IN THE COMMITTEE ROOM, HEALTH BOARD HQ, BAGLAN

Present

Tom Crick, Independent Member ABMU Health Board (in the chair)
 Jackie Davies, Independent Member, ABMU Health Board
 Jeremy Griffith, Director, Delivery Unit
 Philip Barry, Assistant Director – Scheduled Care, Delivery Unit
 Sam Moss, Finance Business Partner, ABMU Health Board

In Attendance

Liz Stauber, Committee Services Manager, ABMU Health Board
 Claire Mulcahy, Committee Services Officer, ABMU Health Board

		<u>Actions</u>
12/18	Welcome and Apologies	
	Tom Crick welcomed everyone to the meeting, in particular Jeremy Griffith as this was his first meeting. Apologies for absence were received from Lynne Hamilton, Director of Finance, ABMU Health Board;	
13/18	Minutes of the Previous Meeting	
	The minutes of the meeting held on 12 th February 2018 were received and confirmed as a true and accurate record.	
14/18	Matters Arising	
	There were none.	
15/18	Action Log	
	The action log was received and noted .	
16/18	Committee's Work Programme	
	The committee's work programme was received and noted .	
17/18	Director's Report	
	The director's report was received . In introducing the report, Jeremy Griffith highlighted the following points:	

	<ul style="list-style-type: none"> - A Performance Improvement Manager had been seconded from the Delivery Unit into ABMU to support and focus on scheduled care work within the Health Board. This was initially for a period of six months but has been extended for a further six months after discussion with the Chief Operating Officer with the costs covered by the Health Board. - Two Performance Improvement Managers had been appointed into the Delivery Unit and had a specific focus in progressing the following at a health board level; the national cancer pathway, cancer performance, stroke improvement programme, scheduled care and capacity and demand planning - The work programme for 2018/19 has been developed in partnership with NHS Wales and Welsh Government and there were both internal and external governance arrangements in place. - The Delivery Unit was adapting its approach to work programme development for 2019/2020 to align itself with the 'A Healthier Wales – Our Plan for Health and Social Care' publication. This was to ensure the Delivery Unit were 'fit for the future' and were focused on the needs of NHS Wales. - A newly formed Performance Assurance Board was established in May 2018 to assess the delivery framework performance and performance against plan for each organisation. The output of which was an exception report that was a standard agenda on the Welsh Government Quality and Delivery Board. - The current financial position stood at an underspend of £35k. Of which, £22k had been generated by not backfilling a secondment and maternity leave and the rest has arisen from non-pay underspend. - There were currently uncommitted reserves of £127k but it is anticipated that all of the reserves would be utilised by the 2018/19 pay increase and the clinical leads budget, leaving a small surplus for 2018/19. - It was highlighted that Item 10 on the Risk Register Statutory and Mandatory training currently sat at 90%. Jeremy Griffith stated that this was due to issues with ESR (electronic staff record) but provided assurance that there was a big drive within the Delivery Unit to reach 100% compliance. - The cumulative sickness performance for the period April 2018 - August 2018 showed a total rate of 0.90%. <p>In discussing the report, the following points were raised:</p>	
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	<p>With regards to the work programme development, Tom Crick commented that this was a refreshed approach in the context of the challenges NHS is about to face and how the Delivery Unit would be in strong position going forward in their ability to support the NHS. Jeremy commented that a change in the perception of how the Delivery Unit operates was needed in NHS Wales. He emphasised that they were there for support and coaching and their main objective was to 'hold the mirror up' in a sense.</p> <p>In discussion surrounding the financial position, Phil Barry highlighted that historically there has been a large underspend at year-end but to ensure these resources are utilised the Delivery Unit had agreed to fund events and conferences for NHS Wales and would also use the monies for clinical engagement.</p> <p>Tom Crick queried how much of the uncommitted reserves would be taken up by the 2018/19 pay increase. Jeremy Griffith responded that it was estimated to be £50-60k but on this was still awaited. He informed that a further £50k from uncommitted reserves would be used for the clinical leads budget and a further £10k for a bespoke North Wales office for Delivery Unit staff based in that area. Tom Crick highlighted how a having an all-Wales footprint was important for the Delivery Unit and NHS.</p> <p>In discussion regarding the risk register, Phil Barry confirmed that the Delivery Unit was using the standard 5x5 matrix to calculate the risk register scores but would look to use the health board's standard for colour coding going forward. Tom Crick stated this was good from consistency point of view as risk registers are being looked at for standardisation across the health board.</p> <p>Phil Barry highlighted that the Delivery Unit had received feedback that they were somewhat an 'invisible organisation'. He informed that they were developing a website and had now set up twitter account '@NHSDU'. Tom Crick commented that this was a good engagement tool and queried whether this had made a difference from a recruitment perspective. Phil Barry replied that it had, in that applicants now had an extra level of detail about the organisation and could learn more about the organisation they were applying to.</p>	
Resolved:	- The report be noted .	
18/18	Service Level Agreement	
	A verbal update regarding the Service Level Agreement was received .	

	<p>In introducing the update, Jeremy Griffith informed that the 2018/19 Service Level Agreement was yet to be signed by the Health Board.</p> <p>In discussing the report, Tom Crick undertook to follow up with Pam Wenger and finance colleagues as to the position of the service line agreement and to ensure its sign off as soon as possible.</p>	TC
Resolved:	<ul style="list-style-type: none"> - The report be noted. - Tom Crick to follow up with Pam Wenger and finance colleagues as to the position of the service line agreement and to ensure its sign off as soon as possible. 	TC
19/18	SEL Expenses	
	<p>A verbal update regarding SEL expenses was received.</p> <p>In discussing the update, Phil Barry advised that the SEL technicality issue regarding documenting travel from base to home on separate day, still remained unresolved. A letter of cover from Shared Services which stipulates that the workaround is acceptable is yet to be received. Jeremy Griffith stressed that this needs to be resolved for audit purposes.</p>	
Resolved:	<ul style="list-style-type: none"> - The report be noted. - Tom Crick to chase an update from Julian Quirk as to whether other NHS Wales organisations had experienced similar issues with the expenses system and confirmation that the suggested workaround was acceptable. Update to be circulated. 	TC
20/18	Recruitment	
	<p>A verbal update on recruitment was received.</p> <p>In discussing the report, the following points were raised:</p> <p>Jeremy Griffith stated that Delivery Unit posts were now attracting a significant number of applicants. There are currently two substantive posts out to advert, one Band 5 and one Band 4. He also informed that there was currently an undergraduate mathematics student in post within the analytical team and this would be a rolling programme year on year.</p> <p>Jeremy informed that the Unit was investing in their analytical team and praised them for their expertise and high level of work. Tom Crick highlighted the importance of having a resource like this for pushing forward with data driven policy</p>	

	<p>making.</p> <p>There was also discussion regarding staff turnaround and Jeremy Griffith assured that the Unit are prepared for staff movement in terms of secondments and staff leaving. He informed that he had a contact with a recruitment agency with a good staff resource, if ever they were in need to recruit to ensure delivery on the Unit's workload.</p>	
21/18	Any Other Business	
	There was no other business and the meeting was closed.	
22/18	Date of Next Meeting	
	The next meeting would be held on 18 th December at 1.30pm, ABMU Headquarters.	

ABMU HEALTH BOARD**UNCONFIRMED**

**MINUTES OF THE EMERGENCY MEDICAL RETRIEVAL AND TRANSFER SERVICE
(EMRTS) GOVERNANCE SUB-COMMITTEE
HELD ON 5TH OCTOBER, 1.30PM
IN THE COMMITTEE ROOM, HEALTH BOARD HQ, BAGLAN**

Present

Tom Crick, Independent Member, ABMU Health Board (in the chair)
 Jackie Davies, Independent Member, ABMU Health Board
 Sarah Spencer, Deputy Medical Director, ABMU Health Board
 Sam Moss, Finance Business Partner
 Neil Stoodley, Deputy Unit Finance and Business Partner
 Mark Winter, Service Manager, EMRTS
 David Lockey, National Director, EMRTS

In Attendance

Liz Stauber, Committee Services Manager, ABMU Health Board
 Claire Mulcahy, Committee Services Officer, ABMU Health Board

		<u>Actions</u>
26/18	Apologies	
	Apologies were received from Lynne Hamilton, Director of Finance, Pam Wenger, Director of Corporate Governance and Stephen Harray, Chief Ambulance Service Commissioner	
27/18	Minutes of the Previous Meeting	
	The minutes of the meeting held on 14 th May 2018 were received and confirmed as a true and accurate record, except to note the apologies of Jackie Davies, Non-Officer Member.	CM
28/18	Matters Arising	
	There were no matters arising.	
29/18	Action Log	
	<p>The action log was received and noted with the following updates:</p> <p>(i) <u>Action Point One</u></p> <p>David Lockey explained that the main focus in terms of research for EMRTS at the moment was the Extended Hours Study. An evaluation from Swansea University was</p>	

	<p>due shortly and he would update the Committee with results and progress.</p> <p>(ii) <u>Action Point Two</u></p> <p>David Lockey gave an update on the blood transfer issue. He informed that the issues with Welsh health boards had now been resolved but dialogue was still ongoing with one particular hospital in England.</p>	
30/18	EMRTS Governance Sub Committee Work Programme	
	The committee's work programme was received and noted .	
31/18	Director's Report and Clinical Governance Report	
	<p>The director's report for quarter one which covered April to June 2018 was received.</p> <p>In introducing the report, David Lockey highlighted the following points:</p> <ul style="list-style-type: none"> - The report had a different emphasis than those previously in that there was less clinical detail but was happy to take comments with regards to the content and structure. - David explained that during this quarter, the Air Support Desk Interrogated 5271 calls which resulted in 733 activations of resources. The majority of these cases were road traffic accidents, cardiac arrests and trauma. - The Clinical Fellowship Programme had positively impacted on recruitment and had given the ability to source staff from within Wales. - EMRTS had delivered a number of continuing professional development and educational events during this quarter. In particular, EMRTS had presented to cross-party assembly members at a Welsh Government event. - The Helicopter Transfer Practitioners (HTPs) had settled well into their roles and the Charity had committed funding for a further two posts. - Progress has been made with colleagues at Bangor University on the Development of a bespoke MSc in Advanced HEMS Practice. - The 24 hour service provision was still being worked through, a task and finish group had been set up to look at the current unmet need before the health board 	

	<p>and major trauma network reconfigurations take place.</p> <p>In discussing the report, the following points were raised:</p> <p>Tom Crick requested that the Director's report and the Clinical Governance report were brought to the Committee as two separate items going forward. This was agreed.</p> <p>In discussing the Clinical Fellowship, Mark Winter stated that there had been high demand for places and therefore strong competition. Tom Crick enquired how EMRTS would ensure the diversity of these recruits. Mark Winter replied that the majority of this was already done within the recruitment process. Mark Winter highlighted they were currently running five programmes within Wales; North Wales, ABMU, Aneurin Bevan, Cardiff and Vale and Cwm Taf, and were sourcing good quality doctors from these programmes.</p> <p>In discussion regarding the 24 hour EMRTS service, Tom Crick undertook to state that there needed to be a link between this and the major trauma network discussions. David Lockey stated that the 24 hour EMRTS service attendance at trauma cases and retrieval to the major trauma centre had been discussed at every major trauma centre network board. Sarah Spencer stated that the plans are far from finalisation and stressed that clarification needed to be sought on what the interface would look like, in particular for the retrieval from other hospitals which don't meet the criteria for a trauma unit.</p> <p>Tom Crick queried whether the financing of the 24 hour service had been discussed. David Lockey replied that this was in process and Stephen HARRY was taking through normal channels on behalf of EMRTS.</p>	<p>DL</p> <p>TC/DL</p>
Resolved:	The report be noted .	
32/18	Financial Position	
	<p>A report setting out the financial position was received.</p> <p>In introducing the report, Neil Stoodley highlighted the following points:</p> <ul style="list-style-type: none"> - As at the end of August (Month 5) the EMRTS financial position was an underspend of £21k. - The 2018/19 position included hosting costs of £139k plus inflation - Discussions were still ongoing regarding the allocation transfer between Welsh Ambulance Service NHS Trust (WAST) WAST and ABMU for the EMRTS service. If progressed, funds would be received through Health 	

	<p>Board allocations from Welsh Government rather than via WAST. It was expected that this would be finalised by next meeting.</p> <p>In discussing the report, the following points were raised:</p> <p>In discussion regarding the funding transfer from WAST to ABMU for the EMRTS service, Tom Crick queried whether the funding for the paramedics posts that had been converted from Band 5 to Band 6, had ever been received by WAST from Welsh Government. Neil Stoodley informed that this was still underway and was yet to know if the funding would be transferred at band 6 or band 5 level.</p> <p>Neil Stoodley highlighted there would be a small surplus of around £20k resulting from training income. There was no significant swing expected, therefore this would remain at year end.</p> <p>Tom Crick queried whether this surplus could be rolled over into the next year and Neil Stoodley replied that historically this has been the case.</p> <p>Mark Winter highlighted that EMRTS do not have a Capital budget and that these surplus funds come in to good use when equipment needs to be replaced. Tom Crick pointed out that in this case, it was beneficial to have an underspend.</p>	
Resolved:	The report be noted .	
33/18	Risk Register	
	<p>A verbal update on the risk register was received.</p> <p>Mark Winter stated that after recent discussions with Pam Wenger on how to further develop the risk register, it was now under review and there would be an update to the Committee on its progress at the next meeting.</p> <p>Tom Crick commentated that risk registers across the Board had been under reflection and Pam Wenger was keen to reach a standardised approach.</p> <p>Mark Winter assured that the latest risk register had been taken to the recent Risk Management Group and the group were comfortable the EMRTS position in terms of risk. Tom Crick commented that it was useful for the risk register to be considered at the Risk Management Group but stated it would still need full consideration at this sub-committee.</p> <p>Tom Crick queried what the expected ramifications of Brexit would mean for EMRTS. Mark Winter responded that as it was a wider sector issue, it was difficult to predict at present.</p>	
34/18	Memorandum of Understanding - EMRTS and Bristow	

	Helicopters Limited UK Search and Rescue Helicopter Service	
	<p>A Memorandum of Understanding (MOU) between Bristow Helicopters Limited (BHL) Search and Rescue Helicopter Service and EMRTS was presented to the Committee.</p> <p>Mark Winter informed that this MOU was formed to further enhance the relationship between the organisations and to ensure that a framework for cooperation was in place. Both organisations work closely together at coastal and on shore' cases and most deployments are geographical rather than medical. It was intended that both parties would participate in joint working going forward and this would include a formal debrief process, training, incident reporting, governance and case review and joint case studies.</p> <p>Mark Winter informed that this MOU had gone through a number of committees and assured that the committees were content with the terms.</p> <p>Jackie Davies sought assurance that this agreement would not place responsibility on EMRTS for the sign off of Bristow's clinical competencies. David Lockey responded that it would not, EMRTS were not responsible for Bristow's clinical governance.</p> <p>With regards to the document itself, Tom Crick pointed out that there were some formatting errors, with which Mark Winter agreed to amend before sign off.</p> <p>Tom Crick commented that this was positive partnership between the two organisations and was content to approve the memorandum of understanding.</p>	MW
Resolved:	The Memorandum of Understanding be approved and noted by the Committee, subject to the discussed formatting amendments	MW
35/18	Single Tender and Quotation Actions	
	A single tender and quotation request form for five T1 Intelligent Transport Ventilators from Hamilton Medical UK was received and noted .	
Resolved:	The report be noted .	
36/18	Any Other Business	
	There was no further business and the meeting was closed.	
37/18	Date of Next Meeting	

	The date of the next meeting is 7 th January 2018, at Welsh Air Ambulance Offices, Llanelli	
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