



PRIVATE & CONFIDENTIAL

***Minutes of Trust Board held
Thursday 6th April 2017 at 2.00pm in
Parkanaur House, Parkanaur Road, Dungannon***

Present:

Mr P Archer	Chairman
Mr Shane Devlin	Chief Executive
Mr W Abraham	Non-Executive Director
Mr A Cardwell	Non-Executive Director
Dr J Livingstone	Non-Executive Director
Mr N McKinley	Non-Executive Director (part left at 4.00pm)
Dr D McManus	Medical Director
Ms R O'Hara	Director of HR & Corporate Services
Mrs S McCue	Director of Finance & ICT
Mr B McNeill	Director of Operations

In Attendance:

Ms H Coard	Senior Secretary
Mr D Mahaffy	Senior Secretary

1.0 Apologies

There was one apology – Mr T Haslett, Non-Executive Director

2.0 Procedure: Declaration of potential Conflict of Interest / Pecuniary Interest / Quorum

No potential conflicts of interest/pecuniary interest were declared. The Board was confirmed as quorate.

3.0 Minutes of the previous meeting of Trust Board held on 2nd February 2017

Minutes were approved on the proposal of Mr A Cardwell. and seconded by Dr J Livingstone

4.0 Matters Arising:

4.1 Action from meeting 2nd February 2017

No further update has been provided regarding the use of electronic papers at Board meetings. CE to progress with Complaints Manager. It was noted that the papers for this meeting were available electronically.

Action: CE to check progress of the use of electronic papers at Board meetings with Complaints Manager.

5.0 Chairman's Business

5.1 Chairmans Update

The Chairman thanked staff at Dungannon for hosting the pre-Trust Board visit and found them to be very welcoming and commented that the station to be excellent and in a good location. One point of note is illegal parking around the Station which may interfere with Ambulance's leaving the site.

The Chairman gave an overview of his activities and meetings attended since the last Trust Board. Of note the Chairman visited an Exhibition of Northern Ireland Ambulance Memorabilia called 'Blues and Twos' which was being displayed in the North Down Museum. This was organised by Andrew Moore, an RRV paramedic.

6.0 Chief Executive's Business

6.1 Chief Executives Update

CE outlined activities and meetings attended since the last Trust Board. These included:

- Visits to Ambulance Stations in Antrim, Magherafelt, Newcastle, Lisburn and Banbridge.
- Connected with other UK Ambulance Service Chief Executives at a meeting of the Association of Ambulance Chief Executives in Stratford-upon-Avon.
- Commenced a weekly blog which is published on the NIAS Intranet – it was agreed to extend this to include Non-Executive Directors.

Action

Weekly Blog to be extended to include Non-Executive Directors.

7.0 Performance Report as at 28th February 2017.

7.1 Highlight Reports by Each Director

Operations Directorate

The Director of Operations updated Trust Board:

- It was noted that Performance has settled following the busy Christmas period.
- 4% of calls were not answered within 2 seconds, with the average being 7 seconds, this is due in part to a lack of call handlers and will form part of the capacity review.
- The numbers of calls continues to increase, with Category A up by 1.8% compared to the same period last year and total emergency demand increasing by 4.9%.
- There continued to be a big pressure on HALOs during the period. Local initiatives in Ulster Hospital have improved patient handover times, and NIAS will continue to focus on improving these times as part of the performance improvement plan and capacity review. It was noted that in a recent NIAO report it was confirmed that patient handover times is a system wide issue.
- The first meeting of the Demand and Capacity Review Operational Steering Group has taken place with the NIAS Information Team coordinating the provision of supporting data. Workstreams will be ongoing around call standards and definitions of emergency calls. Targets will be discussed and a second model will be developed including resources required. A paper is being developed for consultation and will be shared with the Board. The work of the Information Team—in the provision of data was recognised.
- NIAS are currently on target to replace 20% of fleet annually.
- A NIAS Community Paramedic Project has commenced which has been a long time in development, this fits within TYC and also the Professor Bengoa concept, and is an

excellent opportunity to develop the NIAS workforce. Funded through a EU Body for a period of 2 – 2 ½ years, Northern Ireland has received two of the available eight Community Paramedics positions, who will be deployed alongside a GP practice in Castlederg and will be an extra health care resource in this rural area. The two staff will work within the practice and local community, and can work towards a level eight post graduate diploma qualification by distance learning. A robust monitoring and evaluation process is in place to test the proof of concept although it was noted that a similar model in England was successful. Funding covers both capital and training and it was confirmed that NIAS would retain the capital at the end of the funding period.

Finance & ICT

The Director of Finance updated Trust Board:

Financial Performance

- The Trust is currently reporting a small surplus of £19k for the eleven month period ending 28th February 2017 subject to a number of key assumptions including that any outcome of the Agenda for Change matching process for frontline staff will be fully funded.
- A break-even position is forecasted for the 2016/17 year and final accounts will be produced over the forthcoming months. The position will be subject to audit.
- The Board expressed their thanks to DoF and her team for this excellent result, especially in the current climate, which could become more challenging going into the future.
- A significant Capital Resource Limit allocation has been received for 2016/17 of £9.2m. There has been limited spend to date with regard to the Enniskillen Ambulance Station build, and the purchase of new defibrators, however, finance are engaging with Operations who have advised that the full allocation will be spent by the year end.
- There has been focused attention on the prompt payment of invoices which has led to the target of 95% being achieved.
- Payroll and Accounts payable, have been moved to BSO Shared Services and NIAS are keeping this under review to monitor performance and ensure Benefits realisation. Travel Expenses remain processed within NIAS as NIAS's arrangements are significantly different from other Trusts. BSO is fully supportive of this arrangement to retain this process within NIAS at this stage. The DoF attends Business Systems Forum meetings which reviews BSO Shared Services on an ongoing basis.

Information Technology

- There was no particular issues around system availability to report during the period.
- DoF confirmed that the replacement of the telephony platform in NIAS Headquarters and Altnagelvin to allow for the use of the latest Voice Over Internet Protocol (VOIP) technology is expected to be completed by March 2017.
- The project to refresh core Microsoft Programmes throughout NIAS is expected to complete early in the new financial year.
- The replacement of NIAS Firewalls is nearing completion.

Information Governance

Informatics continue to provide a range of clinical indicators, including falls, hypoglycaemia, acute coronary syndrome and cardiac arrest, to support quality improvements. These are detailed in MD's report.

There continues to be an upward trend in the number of Freedom of Information, Data Protection, PSNI and Solicitors requests which are managed by the Corporate Manager and one other member of staff. In a recent review it was noted that additional resources are required. NIAS continue to liaise at various regional forums with Information

Governance Managers in other Trusts, share learning & experiences and discussing challenges

To end February 2017 NIAS have responded to 73.79% of FoI requests within the target of 20 days. The Information Commissioner (ICO) has been in regular contact with NIAS and a number of other Health Trusts to monitor performance against this statutory duty. DoF and Corporate manager are engaging ICO for advice and to share good practice.

The paper based Patient Record Form continues to be challenging, with informatics processing between 13,000 – 15,000 individual records per month. There is a significant challenge in scanning these records and checking. DoF highlighted the important of the ePRF.

Human Resources

The Director of HR&CS updated Trust Board as follows:

- NIAS continue to working in partnership with Trade Unions in Job Evaluation roles. A number of recruitments are in progress, which will provide good career progression opportunities for staff.
- NIAS had met the attendance target in February, however, cumulatively for the year the Trust is consistently failing to meet the target. HR&CS have instigated a number of measures to address high levels of sickness absence, including consideration of a peer support model, health promotion / signposting, promotion of flu vaccine, the relaunch and promotion of Carecall service to staff, and access for all staff to a fast track physiotherapy service. HR also are the lead in a Health & Well Being Group, and provide support to Managers and Area managers. It was noted that Health & Wellbeing is on the Corporate Plan.
- It was noted that that one member of staff had sustained a needle injury, and MD confirmed that within NIAS the number of incidents of this type are small as the Trust has robust protocols in place and this is covered substantially in training.
- Training for future Associate Ambulance Practitioners continues and this involves very detailed programmes and external verification for all students.
- The Trust has successfully met the target of 130 staff successfully completing the Q2020 E-Learning programme by end of March 2017. This training will continue to be rolled out throughout the Trust. DoF thanked the Senior Training Officer for her efforts.

Medical

The Medical Director updated the Trust Board as follows:

- A review of the Business Continuity Strategy, Policy and overarching plan has commenced and completion is anticipated within Q1 2017/18. Following this, a programme to exercise Business Continuity Plans will be developed.
- The review of the Incident Reporting Policy and associated Procedures by the Risk Manager has recommenced and is expected to be completed by end Q1 2017/18. The MD advised that this is a substantial piece of work and it is hoped that this will be presented at next Board.
- Regular reports on complaints, compliments, alerts etc. continue to be provided to the Assurance Committee.
- The Community Resuscitation Development Officers and Regional Manager posts are currently subject to job evaluation, following which recruitment will commence later this month. These appointments will support the full implementation of the Regional Community Resuscitation Strategy.

- As previously reported to Trust Board, the introduction of an ePRF was significantly delayed due to lack of support for revenue funding from the Commissioner. This has now been received. A number of questions and clarifications have been received from the Department in relation to the previously submitted business case, and these have been responded to. Approval of the business case to allow further progress to procurement is still awaited but NIAS remains engaged with both HSCB and DoH. The Medical Director again emphasised that an ePRF was essential to support future development within the Service.
- The Board was updated on the work that is ongoing within the Trust in relation to Patient Client Experience and Personal and Public Involvement. It was noted that NIAS continues to be involved with the HSC "10,000 Voices" programme, and to date has collected approximately 300 patient stories through this, the vast majority of which are very positive.
- The Medical Director provided a report on the Quality Improvement Programme and presented the compliance with care bundles in relation to a number of clinical conditions. He highlighted a number of areas of non-compliance and the improvements that have been achieved in these areas through the Quality Improvement process. It was noted that in order to improve compliance with the falls care bundle and referral pathway, May has been designated as "falls month" with a number of educational and awareness issues planned. He hoped that in the future the improvements in the quality of care could be demonstrated in graphical rather than tabular format.

8 ICT Strategy 2017-22

DoF presented ICT Strategy 2017-22 for approval. It was noted that ICT systems were benchmarked against other UK Ambulance Trusts, and although NIAS scored high in some areas, the Trust scored lower in other areas, due to the lack of an ePRF.

It was noted that, whilst this is a well-formed strategy, a clear implementation plan and associated annual plans will need to be developed to ensure that it is delivered. The implementation of this Strategy will be monitored through the Assurance Committee.

On the proposal of Dr J Livingstone, seconded by Mr W Abraham, the ICT Strategy 2017-22 was approved.

9 Assurance Committee

Dr Livingstone confirmed that the Assurance Committee ToR will be reviewed and presented at the next Board. Dr Livingstone suggested that the Corporate Risk Register should be reviewed by the Trust Board at least once or twice a year.

10 Trust Delivery Plan 2016/17

The CE presented the Trust Delivery Plan 16/17. This had previously been approved in principle by the Trust Board on 6th October 2016 before submission to the HSCB. The HSCB have approved the Plan, and the CE asked the Trust Board for final approval.

On the proposal of Dr J Livingstone, seconded by Mr A Cardwell, the Trust Delivery Plan 2016/17 was approved.

11 AOB

11.1 Early Morning Alerts

It was noted that Non-Executive Directors do not receive Early Morning Alerts that are issued by the Communications Department to notify Senior Staff of issues


that have emerged which may effect NIAS. DHR&CS to ensure Non-Executive Directors are included in the circulation list.

Action

DHR&CS to ensure Non-Executive Directors are included in the Early Morning Alerts circulation list.

Date, Time and Venue of Next Meeting

The next scheduled Trust Board will be held on Thursday 1st June 2017 @ 2.00pm in the Western Division.

Signed: 
(Chairman)

Dated: 01.06.17