



***Minutes of a Trust Board Meeting held
Thursday, 4 February 2016 at 2.00pm, in the Kilmorey Arms Hotel,
41-43 Greencastle Street, Kilkeel, Co Down, BT34 4BH***

Present:

Mr P Archer	Chairman
Mr L McIvor	Chief Executive
Mrs S McCue	Director of Finance & ICT
Dr D McManus	Medical Director
Mr B McNeill	Director of Operations
Mrs L Gardner	Assistant Director of HR&CS
Mr N McKinley	Non-Executive Director
Mr A Cardwell	Non-Executive Director
Dr J Livingstone	Non-Executive Director
Mr T Haslett	Non-Executive Director
Mr W Abraham	Non-Executive Director

In Attendance

Miss K Baxter	Executive Administrator (T)
Ms J Fleming	Senior Secretary

Welcome and Format of the Meeting

The Chairman opened the meeting by welcoming members of the Trust Board.

1.0 Apologies

Ms R O'Hara, Director of Human Resources & Corporate Services

**2.0 Procedure: Declaration of potential Conflict of Interest/Pecuniary Interests
Quorum.**

No potential Conflicts of Interest/pecuniary Interests were declared and the Board was confirmed as quorate.

3.0 Minutes of the Previous Meeting of the Trust Board held on 3 December 2015.

Members accepted the minutes as a true reflection of discussions held on the proposal of Dr Livingstone, seconded by Mr Cardwell.

Action: Approved

4.0 Matters Arising;

Action Log from Meeting held 3 December 2015 :

Visit to Newcastle Ambulance Station

The Chairman advised that due to recent personal commitments he has not yet written to the Chief Executive of the Belfast Trust to arrange for NIAS Board to visit the Royal Victoria Hospital A&E Department. Item to remain on Action Log.

Performance Report

The Assistant Director of HR&CS confirmed that the staff communique on the Job Evaluation process has now been issued. Remove from log

The Chief Executive confirmed that the Complaints Report & Patient Experience Stories report have now been reinstated into the HR&CS Trust Board Performance Report. Remove from Log.

In relation to the Regional Community Resuscitation Strategy, the Chief Executive advised he has written to Dean Sullivan of Health and Social Care Board and awaits his response with regard to the clarity of the funding.

Other Matters Arising

None

5.0 Chairman's Business

5.1 Chairman's Update

The Chairman gave a brief outline of his diary commitments since the last Board meeting.

5.2 Visit to Kilkeel Ambulance Station

The Chairman expressed his appreciation for the earlier visit to Kilkeel Ambulance Station asking that his thanks be passed on to all involved. He recognised Kilkeel Station as a model station and the Board echoed these sentiments.

Action: The Chairman to contact the Chairman of the Belfast Trust to arrange a site visit for Board members to the Royal Victoria Hospital A&E.

6.0 Chief Executive's Business

6.1 Chief Executive's Update

The Chief Executive gave a brief outline of some of his activities since the last Board Meeting. Dealing with winter pressures took up a lot of his time,

however he highlighted the following activity:

- Working with Director of Operations to improve performance.
- Engagement with Health & Social Care Board (HSCB) re HSC financial balance.
- Engagement with Strategic Leadership Group.
- Engagement with the Air Ambulance (HEMS). At this point the Chief Executive invited Medical Director to update the Board who advised that the public consultation closed on 22 January 2016. The outcome is awaited.

The Chairman and Board members congratulated the Chief Executive on his appointment as Chief Executive of BSO.

7.0 Performance Report as at 31 December 2015

7.1 Operations

The Director of Operations updated members advising the verbal Report is comprised of three components: -

- (1) Review of performance
- (2) Overview of Christmas and New Year period
- (3) Plans to improve performance at year end.

Review of Performance

- Overall activity in December 2015 had increased by 2% equivalent to an additional 24 calls each day when compared to December 2014. Compared to November 2015 activity increased by 5.5%, the equivalent to 61 additional calls per day.
- Emergency activity rose by 7.6% in comparison to November 2015 equating to 40 additional emergency calls per day from previous month.
- NIAS has not met the Cat A target. Cumulatively Cat A demand has dropped by 4.3% compared to April – December last year. The cumulative number of Cat A Calls responded to within 8 minutes has also significantly dropped, 14.2% compared to the same timeframe.
- The average Cat A response regionally in December 2015 was 11.41 minutes with Belfast achieving 9.01 minutes and 16.16 minutes in the Northern LCG.
- NIAS did not meet the conveying target in any of the LCG areas.
- RRVs contributed 24% toward Cat A response times within 8 minutes
- In December 2015 50.8% of all ambulance turnaround times were “in standard” (30 minutes or less) compared to 54% in December 2014
- Emergency Department ambulance turnaround times has increased by 21% compared to December 2014 showing an additional 1047 hours lost during December 2015 compared to December 2014. Loss of ambulance production hours equates to 8 ambulances lost per day of December 2015 compared to 6.6 ambulances lost in December 2014.

- The circumstances and process used to implement diverts were explained in detail.

Overview of Christmas and New Year Period

The Director of Operations expressed his appreciation to all staff who had worked over the Christmas and the new year period particularly in light of the increased number of Cat A Calls received. He recognised recent problems exacerbated by diverts, and acknowledged that while Transforming Your Care (TYC) projects will bring benefits, this will take time. He further recognised the pressure on staff, particularly regarding ambulance turnaround times and late finishes.

Plans to improve performance by Year End

The Director of Operations outlined recent engagement with Commissioners and in particular the recent work of the Operations Team in the development of the March 60 Plan which aims to achieve no less than 60% performance regionally during March 2016.

The following questions/points were noted:

- Can the March 60 Plan be sustained?
 - With reduced demography funding this would not be possible but added it would provide guidance to assist in future funding applications.
- The Board asked for clarity regarding the HALO posts
 - The Director of Operations confirmed that the HALO posts advertised were to replace the previously held posts on a recurrent basis and were not new positions.

Discussion ensued regarding diverts and ambulance turnaround times particularly the length of turnarounds. The Director of Operations commended the work of the Workforce Stabilisation Programme over the past 18 months in the recruitment of paramedics, Emergency Medical Technicians and Ambulance Care Attendants.

In relation to Control, the Director of Operations agreed to provide information in relation to identifying and triaging calls.

The Director of Operations gave a brief update on Fleet and Estates. The following points/comments were made:

- The Fleet Report is very positive with most of the fleet being less than 5 years old.
- New Ballymena Ambulance Station progressing well – due to complete late February 2016. Building will soon be ready to occupy.
- Enniskillen archaeology report showed no significant finds and report submitted to planning with approval awaited.
- Roll out of new uniform planned for Summer 2016.

- The Board asked the reasons for the lack of progress of the Fleet Maintenance Contract?
- The Director of Operations indicated that NIAS continue to engage with BSO. The Assistant Director of Fleet has further detail of the current position.

Action:

The Chief Executive agreed with Mr McKinley's observation that written performance reports for the Board needed to be forward facing as well as providing an account of performance to date.

Update on the Fleet Management Contract to be provided at next Board meeting.

7.1 Finance and ICT

The Director of Finance & ICT updated members on the report. The following issues/comments were raised.

- Break-even anticipated at year end subject to key risks and assumptions. As at Month 9 there is a small surplus of £8k.
- Savings Proposals - £1.2m on track to deliver in year.
- Cumulative Capital Spend noted as £7.256m in year.
- Prompt Payment of Invoices –the target has been met and exceeded for the first time this year sitting at 97.4%
- BSO – no particular issues to highlight
- Information Technology Systems – loss of telephony was reported together with Mobile Data fault. Disruption was minimal.
- Information Governance - ongoing work regarding policies and procedures.
- Freedom of Information Requests (FOIs) - 75.2% requests have been processed within 20 working days.
- Data Protection Requests - 61% of subject access requests have been processed within 40 days.
- Patient Report Forms (PRFs) –It was noted that approximately 15,000 Patient Report Forms were manually processed each month.

The Board enquired when work on Policies and Procedures will be completed? The Director of Finance responded that this has been discussed at the Information Governance Steering Group. There has been significant pressure on her team but she will endeavour to have some completed by end March 2016.

7.1 Human Resources and Corporate Services

The Assistant Director of HR&CS gave a detailed update to members. She reported:

- The Trust has an overall vacancy level of 105.35 WTE posts.
- In June 2014 the Trust commenced a workforce stabilisation programme which included recruitment to frontline vacancies. Since this date 176 appointments have been made resulting in a reduction in vacancy levels albeit the Funded Establishment has also increased by 50 WTE since then.
- Staff Communique issued to staff in December 2015 regarding Job Evaluation. Unison have stated that the Trust breached Agenda for Change protocols by issuing the communique but the Trust are clear they have stayed within process at all times.
- Absence Levels at December 2015 were noted as 11.97%. NIAS sickness levels are high in comparison to NHS Ambulance Trusts. HSC Comparative figures are no longer available for comparison by Occupational Grouping as these figures are no longer collated centrally for the HSC by the DHSSPS.
- Industrial Relation issues still remain challenging. The Board were advised that Trade Unions withdrew from the Job Evaluation process in July 2015 and continue to disengage on this. Local issues arising from the Industrial Action day on 13 March 2015 continue to be managed internally.
- BSTP Update - HRPTS was implemented February 2014 and work is ongoing regionally to provide full deployment.
- Benefits Realisation – regional meetings continue.
- Shared Services - NIAS continues to engage with BSO Shared Services in planning the phased transition of the recruitment function to shared services. This will not impact directly on staff within HR Department. It was noted that Payroll in NIAS moved to BSO Shared Services in February 2015. Regular meetings continue with BSO.
- Complaints and Compliments Reports were noted. The full Complaints Report has been reinstated as requested by the Board.

The following issues questions arose:

- In relation to Comp 983 which was not upheld, why was a letter of explanation and apology issued to the Complainant?
 - An apology is issued as part of a standard response. The letter apologises that the patient experience was not good rather than the reason behind the complaint.
- Why over the festive period are sickness levels so high?
 - Sickness is mainly in the operational area and is due to variety of reasons such as muscular skeletal injuries which may be more prevalent at that time of year.
- The Board enquired why staff in NIAS Payroll still remain at HQ and why they have not moved over to Shared Services so that savings can be realised.
 - NIAS were late in transferring across compared to the other HSC Trusts. There are still some issues and now is not the right time to move until the problems have been ironed out. NIAS are working closely with BSO and discussions are ongoing at Audit Committee.

7.4 Medical

The Medical Director gave a brief outline of his Report. He reported:

- Business Continuity Report - Training in Business Continuity was delivered by Department of Finance & Personnel (DFP) to NIAS Directorate Business Continuity functional leads on 2 February 2016. Further work on this is being undertaken to develop a questionnaire to inform the development review and exercising of business continuity plans during 2016/17.
- Major Incident Report - A major incident was highlighted which received significant media attention at the time in which a car had driven into a crowd resulting in six people being taken to hospital with serious injuries. Trust Board were advised that the incident had been managed very well.
- Risk Management Report - Trust Board were advised that a new interim Risk Manager had been appointed from mid-January 2016.
- Community Resuscitation Strategy – Trust Board were informed that a decision from HSCB in response to an investment proposal submitted in November 2014 was still awaited. This was for funding in accordance with the Strategy for a team of Community Resuscitation Development Officers (CRDOs) to support its implementation. While work is still ongoing to support a number of issues, full implementation is significantly constrained by the lack of funding and a number of initiatives have now ceased as a result.
- Electronic Patient Report Form (ePRF) - there has been no further progress. A Business Case was submitted and the Trust is still awaiting Commissioner support for revenue funding. The situation is now further complicated by the regional proposal for an Electronic Health Care Record (EHCR) and whether it will meet the needs of the Trust. The Trust is still awaiting an outcome from HSCB in relation to support for revenue funding and the role of the Trust in the EHCR. The Chief Executive has written to HSCB to request a decision and further information regarding this.
- Alternative Care Pathways – A number of further Appropriate Care Pathways (ACPs) have been introduced with a number of previously introduced pathways now in place on a regional basis. Work is continuing on the development of further pathways and a clinical support desk in Emergency Ambulance Control.
- Patient Experience – It was noted that the reports provided related to calls and patient stories some time ago. It was explained that this was due to NIAS relying on the other HSC Trusts to provide us with patient responses in relation to the Ambulance Service and that often significant delays were experienced in receiving this information. Engagement is currently ongoing to ensure more timely receipt of the information from the other Trusts. While most of the patient stories are positive, there were a number that reflected that patients felt vulnerable and anxious if left alone in the passenger compartment of PCS vehicles. It was agreed that a member of the ambulance crew

- should remain with patients at all times.
- Clinical Audit – An audit of Out of Hospital Cardiac Arrest data in relation to Return of Spontaneous Circulation (ROSC) on arrival at hospital was presented. A significant improvement in this outcome from cardiac arrest was noted and was similar to other ambulance services.

7.5 Chief Executive Report Trust Delivery Plan Report on Commissioning Priorities 2015-16

The Chief Executive identified the key risks the Trust faces:-

- 1) Capacity and Demand;
- 2) Link of timely response to clinical calls (Cat A)
- 3) Financial Balance.

The Chief Executive also provided a brief update on the Trust Delivery Plan on Commissioning Priorities 2015/16 since last Trust Board. He advised the Board that the HSCB had selected NIAS to host a visit of representatives from Finland in relation to Alternative Care Pathways. This meeting is scheduled to take place on 10 February. He advised that information on priorities for 2016/17 is awaited and the Trust will strive to continue to meet CAT A target.

8.0 Items for Approval

8.1 Gifts and Hospitality Policy

The Director of Finance presented this updated policy for approval confirming that it had been to Audit Committee on 12 October 2015.

8.2 Terms of Reference – Audit Committee

The Director of Finance presented the Terms of Reference which had been tabled at Audit Committee on 12 October 2015. The following items have been amended:-

'1.4 The Committee will regularly review and reflect on best practice and adopt new learning as part of a commitment to continuous improvement.'
'2.6 One member of the Audit Committee should have a financial background'.

8.3 Terms of Reference – Remuneration Committee

The Chairman advised that changes were cosmetic and not significant.

8.4 Smoke Free Policy

The Director of Operations advised that all Trusts have been obligated by the DHSSPS to be Smoke Free by 9 March 2016. He indicated that this policy replaces the previous Smoke Free workplace policy of 2007. The

Board remarked that this policy will be difficult to implement.

Action All above approved on the proposal of Mr Abraham seconded by Mr McKinley with the exception of item 8.2 which was seconded by the Chief Executive.

9.0 Items for Information

9.1 Long Service Medal Ceremony

The Chair reminded the Board of the Long Service Medal Ceremony planned to take place on 23 March 2016 in Balmoral Hotel, Belfast. The Lord Lieutenant will not be attending this year as no staff are eligible for the Long Service (Emergency Duties) medal. He remarked a good representation by the Board would be welcome.

9.2 Northern Ireland Ambulance Service HSC Trust Management Statement

The Director of Finance advised that Trust Board have been requested by the DHSSPS to review this document. The Board remarked it is an interesting document setting out NIAS' obligations and objectives. It was noted that gender is an issue on page 17 in relation to Board vacancies (2nd bullet point). The Chairman stated that the Minister makes the final appointments however the point was well made.

10.0 Items for Noting

10.1 Minutes of Audit Committee Meeting held 12 October 2015

Noted

11.0 Application of Trust Seal

The Trust Seal was used once on 16 December 2015 for the Lease for Ballymacarrett/Bridge End.

12.0 Forum for Questions

No questions were submitted through the recognised process. Further discussion of general matters with those present took place after the meeting.

Action: Chairman to consider the procedure for questions.

13.0 Any other Business

None

Date, Time and Venue of Next Meeting

The next meeting of Trust Board will be held on Thursday, 7 April 2016 at 2.00pm in Western Division (venue to be confirmed).

The Chairman thanked those present for attending and called proceedings to a close.

Signed: 
Chairman

Date: 7/4/16