

NORTHERN IRELAND AMBULANCE SERVICE

*Minutes of a Trust Board Meeting held on Thursday, 15 November 2012
at 1.30pm at the Northern Ireland Ambulance Service Headquarters,
Knockbracken Healthcare Park, Saintfield Road, Belfast. BT8 8SG*

Present:

Mr P Archer	Chairman
Mr L McIvor	Chief Executive
Dr J Livingstone	Non-Executive Director
Ms A Paisley	Non-Executive Director
Prof M Hanratty	Non-Executive Director
Mrs S McCue	Director of Finance & ICT
Dr D McManus	Medical Director
Mr B McNeill	Director of Operations
Ms R O'Hara	Director of Human Resources & Corporate Services

In Attendance:

Mrs M Crawford	Executive Administrator
Mrs E Hamilton	Senior Secretary

Welcome and Format of the Meeting

The Chairman opened the meeting by welcoming members of the public and Trust Board and formally welcomed Dr Jim Livingstone, newly appointed Non Executive Director. Dr Livingstone thanked the Chairman for his welcome advising that he was delighted to be a member of the Board and was looking forward to the challenges ahead. He described how he trained initially as a psychologist, then joined the NI Civil Service in 1979 and had just retired from the Department of Health where he was the Director of Safety, Quality & Standards.

1.0 Apologies

Mr N McKinley, Non-Executive Director

2.0 Procedure: Declaration of potential Conflict of Interest Quorum

No potential conflicts of interest were declared and the Board was confirmed as Quorate.

Item 4.1 dealt with at this time

4.1 Quality 2020: A 10 Year Strategy to Protect & improve Quality in Health & Social Care in Northern Ireland

A presentation was made by Dr Paddy Woods, Deputy Chief Medical Officer, DHSSPS. In the discussion which followed, key areas were highlighted including, measuring quality and managing expectations, defining and measuring success and holistic approach including spiritual care.

3.0 Minutes of the Previous Meeting of the Trust Board held on 20 September 2012

One amendment to be made Page 5, Medical 'treat and leave' should read 'treat and refer'. Subject to this amendment members accepted the minutes as a true reflection of discussions held on the proposal of Prof Hanratty seconded by Mr McIvor.

4.0 Matters Arising

4.2 Trend Analysis on Recruitment

The Director of HR&CS advised that a paper will be presented at the next board meeting.

4.3 Corporate Workshop 9 November 2012

The Corporate Plan was refreshed during the workshop to ensure that it is relevant and appropriate. Executive team are tasked with developing options, choices and consequences paper for presentation to Trust Board. It was agreed that it was a good workshop which provided the opportunity for the Executives and Non Executives to work together to face the difficult future which lies ahead. It was suggested that further workshops should be planned to consider progress made. Members of the Board concurred that it was good to keep the Non Executives in the 'loop' and get more exposure. It may also be useful for Non Executives to attend other events which would help inform them of the wider health care and where NIAS fits, budget permitting. The Chief Executive advised that NICON hold a number of events which may be of interest to the Non Executives. Mr Samson from the PCC offered membership to Board members of the PCC's Members Forum which would provide them with monthly updates of any events across the HSC.

4.4 Agenda For Change Communication

Paper presented for Board's information which related to a request by a staff member at the AGM in September 2012; this has been issued to all staff. Director of HR&CS provided an update of current position which is that 3 posts have been forwarded for consideration to the Regional Quality Assurance (RQA) who has identified personnel to look at these posts. Board to be kept apprised of situation.

4.5 Whistle Blowing Training

The recent excellent training on Whistle Blowing was raised and it was considered that it may have been beneficial to have had a joint training session between Non executives and the Executive team rather than a separate

sessions. The Board inquired as to what level of monitoring will be required for issues raised and how it will be reported to the Assurance Committee. It was also noted that there are some aspects of the policy that require to be reviewed however it was agreed that the existing policy should settle for 6-12 months before review.

5.0 Chairman's Business

5.1 Visit to Ardoyne Ambulance Station

The Board enjoyed their visit this morning to Ardoyne adding that it is a very busy station. Staff did bring the Board's attention to some issues with the building ie heating and restricted toilet facilities. The Board enquired if there were any year-end non-recurrent funds that could be used to update the air conditioning system. Minor schemes may be an option and if so the Division as a whole would be looked at for possible prioritised improvements. There is a notable team spirit within the station which is well run and the Board wished to convey their thanks to the staff. Dr Livingstone asked if it would be possible for him to spend a day at an ambulance station to give him experience of what actually happens. The Chief Executive advised that he would arrange, as part of his induction, a programme to cover different aspects of the service to give him experience of the challenges faced.

5.2 Chairman's Update

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

5.3 Appointment of Non Executive Directors

The Chairman advised that he has not yet been informed of the appointment of a second Non Executive Director.

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:

- 27/09/12 Met with the Minister to discuss winter pressures and planning. This will be a major challenge and measures are to be put in place to manage moving the quality agenda forward with safer practice.
- 24/10/12 Attended an Emergency Care Learning Event where learning was shared. NIAS will work with them to enhance the service
- 02/10/12 GP Out of Hours – There was a good attendance with a good debate. Who will manage unscheduled care going forward? Discussion should take place with NIAS before decisions are made. Regional Destination Protocols (RDP), NIAS should be front and centre with this and possible progress has been made to support development.

- Has the service directory been completed?
- Work is ongoing with the Public Health Agency but no decision has been taken by HSCB on the development of a Directory of Services.

24/10/12 Took part in a teleconference to Ambulance Service Network of which the Chief Executive is a member of the Board. ASN will fold from next April 2013. Martin Flaherty will be the Chief Executive of Association of Ambulance Chief Executives (AACE) from January 2013 and has offered NIAS 50% discount for associate membership. This would be of benefit as it would secure membership on the various national Directors fora which will give access to influencing and shaping various UK initiatives, NHS pathways etc.

Prof Hanratty added that she also met with Chief Executive as Chair of the Assurance Committee to discuss the most recent meeting of the Committee.

7.0 Assurance Framework as at 30 September 2012

The Chief Executive advised that he is currently redeveloping the framework document which will report on the three strategic aims and nine strategic objectives of the service and will aim to go live with the document in April 2013. A slight rewording at the introduction will allow for the definition of quality encompassing safety, to reflect the Minister's definition of quality within the Health sector.

Medical

The Medical Director presented his report and the following comments/issues were raised.

- The Board commended the Medical Director for his comprehensive report which feeds in very clearly to the strategic aims and objectives of the Trust. The Chief Executive added that it is important that the Board are apprised of serious adverse incidents.
- It is difficult to identify when it happens and when it is reported?
- The criteria is set for the definition of serious adverse incidents. However it was advised that it is not always immediately apparent that an incident falls into the category of a Serious Adverse Incident and it is only when further information is provided that it is noted as such. There is learning to be gained from each incident. It was considered that the Trust should have the ability to de-escalate serious adverse incidents as appropriate.

Operations

The Director of Operations updated members on his report. He added that the Trust has introduced a Liaison Officer at both the RVH and Ulster hospitals to work with staff to improve patient flow from ambulances. The following comments/issues were raised:

- In regard to strategic objectives, is the Trust deluded regarding the financial situation and whether there is a solution to the rural problems?
- The relevance of this target has been discussed with the Commissioners who did not feel that it was appropriate to divert resources to improve below target LCG areas. It was added that the targets are not set by NIAS however the LCG target is useful in planning as it allows the focus to remain on difficult areas. It was stated that the Trust is at breaking point which makes it difficult to motivate staff under increasing pressure. Discussion ensued and it was suggested that other regional resources such as the 1800 district nurses could potentially be used as first responders in rural areas.

The Board was updated on the Enniskillen Business case where it was advised that further discussions are being held. While a bid for the proposed relocation site is in place, this is a lengthy process and in the interim the Western Trust has proposed to decommission the existing site, transferring all except the area occupied by NIAS, which the Trust could acquire. Board will be kept apprised of the situation.

Finance & ICT

The Director of Finance & ICT updated members on her report referring to the capital spend advising that fleet replacement is a staged process with invoices being issued toward the end of the year. It is intended that this spend will be complete by year end. Impact has already been felt of the new system being introduced for procurement at BSO with NIAS due to 'go live' in December 2012.

- The new system will be challenging for staff. It was considered appropriate to communicate the Board's appreciation to staff concerned for all their efforts to date.
- A report will be presented to Trust Board in January 2013 after the 'go live' in December 2012.

Human Resources & Corporate Services

The Director of Human Resources & Corporate Services updated members on her report and advised that KSF had gone 'live' on 3 October 2012 and would feature within her report for the next Board meeting.

The Board were referred to Page 66 which records grievances and disciplinaries. It was commented that Board level awareness of such issues was shown to be a problem at NIFRS.

8.0 Items of Approval

8.1 Management of Aggression Policy

The Director of HR&CS presented the policy advising that the policy was developed in partnership. It had been benchmarked with other ambulance trusts and HSC trusts; it had been equality screened and did not require a full EQIA.

The following minor amendments were suggested:

- 4.2 Where it states that the policy outlines preventative measures. This is not the case and would feature in the procedure only.
- 8.2 Further clarification of the risk owner is required.
- Appendix 3** Under 'assault' where 'resulting in serious physical injury' is answered as yes, it should state the need to 'document on PRF' as well as 'get medical treatment'.

Adoption of the policy was proposed by Prof Hanratty seconded by Dr Livingstone.

8.2 **Policy for Safe Management of Water Systems (including Legionella and Pseudomonas)**

The Board were advised that all Trusts must have a policy in place and monitored through Controls Assurance. The risk for NIAS is low as the Trust does not manage patient areas.

The policy was adopted on the proposal of Prof Hanratty seconded by Dr Livingstone.

9.0 **Items for Noting**

9.1 **GP Out of Hours**

While noting the response to the consultation on GP Out of Hours service the Non Executives requested review of the mechanism by which they get an opportunity to comment on relevant consultations before they are returned. It was agreed that the Board would be included in the circulation list for comment on any consultation the Trust is responding to.

Action: Non Executives to be included in circulation list for future responses to consultations.

9.2 **Minutes of Audit Committee held 11 October 2012**

Noted.

9.3 **Minutes of Assurance Committee held 11 October 2012**

Director of HR&CS undertook to convey the Board's thanks to staff involved in the very useful presentation made on clinical supervision and the role of CSOs.

The Chairman advised that it is his intention to attend future Assurance Committee meetings.

Noted.

9.4 The Safety of Services provided by Health & Social Care Trusts

This document has been circulated to the Board and a response has been issued. This matter will be picked up for further discussion by the Assurance Committee.

Action: NIAS response to be shared with the Board.
To be placed on agenda for Assurance Committee.

9.5 Long Service Medal Ceremony – 18 January 2013

Noted.

10.0 Application of Trust Seal

The Trust Seal has not been used since the last Trust Board meeting.

11.0 FORUM FOR QUESTIONS

No questions received from the floor.

12.0 Any Other Business

12.1 Board Meetings

The Chairman summarised discussions and actions required, advising that it is his intention to finish Board meetings in time for a summary of actions before concluding. The Board considered that the Clinical Strategy 'treat and refer' is of interest to the public and should be on the agenda for a future meeting.

12.2 Queens Ambulance Medal

It was advised that Mr McNeill has received his award from Prince Charles and the Board extended their congratulations.

Date, Time and Venue of Next Meeting

The next meeting of the Trust Board will be held on Thursday, 24 January 2012. Venue to be confirmed.

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

Signed: _____

Date: _____

Chairman