



## **Annual General Meeting**

**Venue:** The British Coal Mining Museum, Overton, West Yorkshire, WF4 4RH

**Date:** Tuesday, 25 September 2012

**Time:** 0930 hours

**Chairman:** Della Cannings

### **Attendees:**

#### **Board Members**

|                     |       |   |
|---------------------|-------|---|
| Della Cannings      | (DC)  | Chairman  |
| David Whiting       | (DW)  | Chief Executive   |
| Patricia Drake      | (PD)  | Deputy Chairman & Non-Executive Director                              |
| Dr Elaine Bond      | (EB)  | Non-Executive Director  |
| Roger Holmes        | (RH)  | Non-Executive Director  |
| Erfana Mahmood      | (EM)  | Non-Executive Director  |
| Barrie Senior       | (BS)  | Non-Executive Director  |
| Stephen Moir        | (SM)  | Deputy Chief Executive & Executive Director of Workforce and Strategy |
| Rod Barnes          | (RB)  | Executive Director of Finance and Performance                         |
| Steve Page          | (SP)  | Executive Director of Standards and Compliance                        |
| Paul Birkett-Wendes | (PBW) | Executive Director of Operations                                      |
| Dr Alison Walker    | (AW)  | Executive Medical Director  |

### **Apologies:**

None

### **In attendance:**

|                |      |   |
|----------------|------|---|
| Mary Wareing   | (MW) | Non-Executive Director (Designate)              |
| Anne Allen     | (AA) | Director of Corporate Affairs & Trust Secretary |
| Jean Hawkins   | (JH) | NHS Yorkshire & The Humber                      |
| Iain McInnes   | (IM) | NHS Yorkshire & The Humber                      |
| Neil Ferguson  | (NF) | NHS Yorkshire & The Humber                      |
| Stuart Ide     | (SI) | YAS Lead Commissioner                           |
| John McCluskey | (JM) | Member of the Public                            |
| Peter Sawyer   | (PS) | Member of the Public                            |
| Anthony Dutton | (AD) | Member of the Public                            |
| Geoff Haywood  | (GH) | Member of the Public                            |
| Mr M Thornton  | (MT) | Member of the Public                            |
| David Mitchell | (DM) | Member of the Public                            |
| David Bolam    | (DB) | Member of the Public                            |
| Bryn Webster   | (BW) | Unison  |

Stuart Sinclair (SS) Unison  
 David Graham (DG) Member of Staff

**Minutes produced by:** (MG) Mel Gatecliff, Executive Support Officer (Interim)

The meeting was preceded by a presentation, between 0900 and 0930, which was open to all members of the public. 'Medical Emergency Response Incident Team (MERIT)' was presented by Dr Dave Macklin (DM), Assistant Medical Director.

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|   | The meeting commenced at 0930 hours.  |               |
| 1 | <p><b>Apologies / Declaration of Interests</b><br/>           Prior to the commencement of the meeting, the Chairman thanked Dr Dave Macklin for his presentation, which she had found very interesting.</p> <p>The Chairman noted that apologies had been received from several Public Members. These apologies had been formally recorded in the membership database attendance record</p> <p>No apologies had been received from members of the Board.</p> <p>Declarations of interest would be noted during the course of the meeting.</p>  |               |
| 2 | <p><b>Minutes of the AGM held on 27 September 2011 including Matters Arising</b><br/>           The minutes of the meeting held on 27 September 2011 were approved as a true and fair representation of the meeting with no matters arising.</p>  |               |
| 3 | <p><b>Welcome from the Chairman of Yorkshire Ambulance Service</b><br/>           The Chairman welcomed members of the public and representatives of partner organisations and staff to the formal Annual General Meeting (AGM) of the Yorkshire Ambulance Service (YAS), which would be looking at the Trust's achievements and performance during 2011/12.</p> <p>She stated that, in line with the Trust's decision to hold its Trust Board meetings in Public closer to the communities it served, the AGM was being held at an external venue for the third time.</p> <p>The Chairman outlined the meeting's agenda and encouraged those present to attend the Trust Board meeting in Public later that day.</p> <p>She emphasised the importance of members of the public becoming members of the Foundation Trust (FT) as they would be able help to influence the future direction of the Trust and the shape of future services.</p> |               |

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|   | <p>The Chairman stated that although good progress had been made in 2011/12 with the continued emphasis on quality, appropriateness of services, etc, the Board continued to be open acknowledging the challenges it still faced and introducing new processes and systems to ensure continued improvement of services.</p> <p>Before inviting the members of the Board to introduce themselves to the meeting, the Chairman paid tribute to the achievements of Non-Executive Director (NED), Roger Holmes (RH), who was retiring at the end of the month and who had played such an important role in the development of the Trust during his six years' service as a NED.</p> <p>The NEDs described the outside experiences and skills that they brought to the Board and the Executive Directors outlined the main responsibilities of each of their roles.</p> <p>The Chairman stated that since her appointment there had been a major refresh of the Board and it was her belief that the Board was now much stronger due to the new mix of skills. She further stated that, following RH's retirement at the end of September she would be the longest serving NED, with 2½ years' service. The Chairman added that full profiles of all Board members could be found in the Annual Report.</p> |               |
| 4 | <p><b>Patient Story</b></p> <p>The Chairman stated that at the heart of all of the Trust's work were its patients. She explained that short films were shown during every Public Board meeting to allow the public to hear about the work of the Trust and for Board members to reflect on any learning.</p> <p>The Chairman introduced the latest patient story, which was shown courtesy of ITV Calendar News (Yorkshire). The film featured a small child with no previous health problems, who had a heart attack and whose life was saved by the YAS ambulance crew.</p> <p>At the conclusion of the film, the Chairman thanked ITV Calendar for allowing the usage of their footage of the story and congratulated the members of staff for helping to save his life.</p> <p><b>Welcome from the Chairman of Yorkshire Ambulance Service (Continued)</b></p> <p>The Chairman stated that becoming a Foundation Trust (FT) was vital for the organisation's future, adding that the Trust had made major step changes during 2011/12 going through several of the formal stages required to assure Monitor, the Strategic Health Authority (SHA), etc that the Trust had the right strategies, plans, etc in place to allow it to move forward as an FT.</p>                                       |               |

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|   | <p>The Chairman further stated that YAS was looking to become an NHS Foundation Trust in 2013 and to help achieve this vision, the YAS Integrated Business Plan 2012-17 had been developed to outline the plans for how the new organisation would be taken forward. The Chairman added that a public consultation had been held at the end of 2011 and 1,604 responses had been received which was an excellent response rate.</p> <p>The Chairman announced that total membership currently stood at 5,730 (1,700 public and 4,030 staff), adding that the Board wanted to see a major increase in public members over the next few months. She stated that staff had been automatically opted in so they had to choose to opt out and complete the necessary paperwork if they did not want to be a member of the organisation that employed them.</p>  |               |
| 5 | <p><b>2011-12 Annual Report and Accounts</b></p> <p>DW introduced the 2011/12 Annual Report stating that the three highlights of the year had been:</p> <ul style="list-style-type: none"> <li>▪ A&amp;E Performance</li> <li>▪ Ambulance Quality Indicators</li> <li>▪ Improved resilience</li> </ul> <p>DW stated that Accident &amp; Emergency (A&amp;E) performance was always at the forefront of the public's mind. The organisation, which had struggled to deliver historically, had delivered against the 2011/12 'Category A (now referred to as 'Red') – 8 minute' national target with a 75.72% outcome overall against a target of 75%. The outcome was up by 2.88 percentage points on 2010/11 despite an increase in demand for services.</p> <p>DW further stated that the 'Category A (Red) – 19 minute' target had also improved, standing at 97.94% overall against a national target of 95%. The internal 'call connect' process measure (from 999 call arriving at the switchboard to vehicle going mobile) had also improved to a 95 second average.</p> <p>He added that the Trust was now working to ensure it could sustain these levels whilst building in head room and improving local response performance.</p> <p>DW stated that Ambulance Quality Indicators (AQIs) were still relatively new. The 11 indicators, which focussed on clinical outcomes, could be benchmarked across all English ambulance trusts and some were also aligned to acute A&amp;E measures, eg 'cardiac arrest survival to discharge'.</p> <p>He further stated that the Trust had done well and was in the upper quartile of several AQIs, including:</p> <ul style="list-style-type: none"> <li>▪ 'Time to answer (999)' and 'time to treatment'</li> <li>▪ 'Red response times'</li> <li>▪ 'Cardiac arrest - survival to discharge'</li> <li>▪ 'Stroke care - transport to specialist care'</li> </ul> |               |

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| <p>DW added that, going forward, the Trust would focus its energies on the lower quartile AQIs which were:</p> <ul style="list-style-type: none"> <li>▪ 'Re-contact rate – following telephone triage', which was quite high compared to other ambulance trusts, and</li> <li>▪ 'Non transfer to A&amp;E'. DW stated that this AQI currently stood at 24% of callers being dealt with at home but could be further improved as about 35% of people taken to hospital left with little or no follow up care.</li> </ul> <p>DW stated that improved resilience included:</p> <ul style="list-style-type: none"> <li>▪ Enhanced Hazardous Area Response Team (HART) capability. This was a group of specialised paramedics who could work at height, underground, in a toxic environment, in a hot zone, etc which had recently been enhanced to take into account terrorist threats;</li> <li>▪ Mass casualty preparation (the next step in MERIT's development); and</li> <li>▪ The Health Gold Cell. The Command Centre, which was based at Wakefield HQ, had the capability and capacity to manage incidents across the whole of the North of England, from those on a small scale through to the strategic management of major incidents with mass casualties.</li> </ul> <p>DW further stated that developments in 2012/13 would include:</p> <ul style="list-style-type: none"> <li>• Emergency service - getting to patients quicker</li> <li>• Cardiac arrest and Major Trauma</li> <li>• NHS 111 - mobilising plans to ensure that YAS was successful in providing urgent care to the 1.8 million people across the county</li> <li>• Developing the workforce</li> <li>• Patient Transport Service (PTS) transformation</li> <li>• Foundation Trust status</li> </ul> <p>DW concluded with his hope that he would stand in front of the 2012/13 AGM as the Chief Executive of Yorkshire Ambulance Service Foundation Trust.</p> <p>RB presented the 2011/12 Financial Overview, stating that 2011/12 had been a very successful year in financial terms. The Trust had delivered all key objectives set nationally except the one relating to the Better Payment Practice Code which related to how quickly suppliers were paid. However, steady progress was being made and it was hoped that, following the implementation of improved systems and processes, this target would be met in 2012/13.</p> <p>RB stated that the organisation's target surplus of £415k had been achieved in spite of difficult financial circumstances across the NHS nationally, adding that the Trust had also successfully achieved 100% of its Cost Improvement Plans (CIPs) for the first time.</p> |               |

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| <p>RB stated that out of a total income of £200.3m, the vast majority of the Trust's income had come from its Emergency Ambulance Services (£162.5m).</p> <p>He further stated that salaries and wages accounted for £145m of the Trust's £197.8 total expenditure, adding that 88% of these costs went into front line service provision and delivery. Transport at £19.2m was also a significant element of expenditure and included fuel, maintenance and replacement of the YAS fleet.</p> <p>RB stated that the Trust had consistently delivered against its break-even cumulative position over the past three years. He added that, in line with Foundation Trust conditions, the organisation's target for 2012/13 was a £2m surplus.</p> <p>Capital Expenditure Plans included Fleet, Information Technology (IT) and Buildings/Estates. RB stated that Fleet was a large part of the cost base as about 40 999 ambulances and a similar number of first response vehicles were replaced each year.</p> <p>He recognised, however, that there were some issues with the Patient Transport Service (PTS) fleet, as overall it was not as new as the organisation would like it to be. However, plans were being developed to replace the older sections of the PTS fleet during 2012/13 to bring it back in line.</p> <p>RB stated that under the IT heading there had been investment in telephony, call centre systems and hardware infrastructure during 2011/12. This would make call centres more resilient to ensure that they were available 24/7 with standby capacity if problems arose.</p> <p>RB stated that there had only been a couple of minor Estates projects during 2011/12 but this area would become a significant part of the capital programme going forward as some of the estate was urgently in need of refresh and the Trust had made a commitment that all of its estate should be fit for purpose in the 21<sup>st</sup> Century.</p> <p>Finally, RB stated that the Trust's auditors, Deloitte, had given an unqualified audit opinion. The organisation had been complimented on the standard of its accounts and the auditors had given further assurance that the Trust had proper arrangements in place to ensure value for money.</p> <p>He added that the Trust Board had reviewed and approved the annual accounts in June 2012. These had been submitted to the Department of Health (DH) in keeping with the national deadlines and would now be adopted at the AGM.</p> <p>The Chairman thanked DW and RB for their presentations. She encouraged those present to read the Trust's Annual Report, which could be found on the YAS website, as it made interesting reading.</p> |               |

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| 6 | <p><b>Questions from Members of the Public</b><br/>Members of the public were invited to ask questions. However, there were no questions.</p> <p>The Chairman thanked those present for attending the meeting and encouraged anyone who was not already a member of the Trust to sign up to become a member. She also thanked the YAS staff involved in organising and preparing the event for their hard work.</p> <p>The Meeting closed at 10:15 hours.</p> |               |

**CERTIFIED AS A TRUE RECORD OF PROCEEDINGS**

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**CHAIRMAN**

\_\_\_\_\_  
**DATE**

DRAFT