



MEETING TITLE		MEETING DATE	
Trust Board Meeting In Public		26/05/2015	
TITLE of PAPER	Trust Executive Group Report & Integrated Performance Report (IPR)	PAPER REF	5.4
STRATEGIC OBJECTIVE	All		
PURPOSE OF THE PAPER	To give the Board assurance on the activity of the Trust Executive Group (TEG) from 24 March 2015 to 17 May 2015, and the opportunity for TEG to highlight the key variances / movements contained within the April Integrated Performance Report (IPR).		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input checked="" type="checkbox"/>
AUTHOR / LEAD	Rod Barnes, Interim Chief Executive	ACCOUNTABLE DIRECTOR	Rod Barnes, Interim Chief Executive
DISCUSSED AT / INFORMED BY – include date(s) as appropriate (free text – i.e. please provide an audit trail of the development(s)/proposal(s) subject of this paper):			
Key performance indicators discussed at TEG, TMG and the Operational Delivery Team meetings			
PREVIOUSLY AGREED AT:	Committee/Group:	Date:	
RECOMMENDATION	That the Board agrees it has sufficient assurance on the activities of the Executive Team and Trust Executive Group during this period. That the Board notes and discusses the variances contained within the April 2015 IPR report, highlighted in the Executive Directors reports.		
RISK ASSESSMENT			Yes No

Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Equality and Diversity Implications <i>If 'Yes' – please attach to the back of this paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Choose a DOMAIN	All Not Applicable Not Applicable		
Monitor Quality Governance Framework Choose a DOMAIN	All Not Applicable Not Applicable		

Report from the Trust Executive Group (TEG)

1. Purpose

To give the Board assurance on the activity of the Trust Executive Group (TEG) from 24 March 2015 to 17 May 2015, and the opportunity for TEG to highlight the key variances / movements contained within the April Integrated Performance Report (IPR).

2. External Environment

- 2.1 Monitor have updated the well-led framework so that the criteria Monitor, the Care Quality Commission (CQC) and the NHS Trust Development Authority (TDA) use to define a well-led organisation are identical. This aligned view of a well-led organisation will underpin future CQC assessments and ratings, while Monitor and TDA will use the updated well-led framework as the point of reference for NHS trusts and foundation trusts. It replaces the quality governance framework (QGF) and the board governance assurance framework (BGAF), which are now effectively incorporated within the well-led framework.
- 2.2 Bradford District Care NHS Trust became the 152nd foundation trust status after being authorised by Monitor on 30 April 2015.
- 2.3 In January the Department of Health invited individual organisations and partnerships to apply to become 'vanguard' sites for the New Care Models Programme, one of the first steps towards delivering the Five Year Forward View and supporting improvement and integration of services. In support of this initiative YAS representatives attended the first meeting of the Mid Yorkshire Care Home Vanguard project on 12 May, which aims to ensure all care homes have appropriate care plans in place and that care is co-ordinated across health and social care providers.
- 2.4 With the outcome of the election now known there are a number of manifesto commitments on health and workforce issues which may have a direct or indirect impact on the Trust. These include specific commitments to find the £8bn additional funding requirement for the NHS set out in the 5YFV, to increase the number of new apprenticeship schemes, to give public sector workers a workplace entitlement to volunteering leave for three days a year on full pay and introducing a tougher threshold for strike action.

3. Business Planning & Delivery

3.1 The business planning priorities include:-

- Dissemination and communication of the Operational Plan for 2015/16 and on-going development of the Trusts' Urgent and Emergency Care Strategy.
- Finalising contract negotiations for NHS 111 and West Yorkshire Urgent Care.
- Agreeing the 2015/16 A&E performance trajectory and associated joint improvement actions with commissioners.
- Implementation of service development priorities for 2015/16 including placing mental health nurses with EOC, expanding frequent callers pathways and clinical advisors within NHS111.
- Developing options for future PTS operating model and continuing with the implementation of automation of planning and scheduling, fleet modernisation, vehicle telematics and improvements to patient on day communication.
- Reviewing and responding to feedback from the formal consultation with staff and staff side representatives on proposed workforce changes within A&E.
- Progressing joint initiatives with fire services and commissioners to support increased use of Public Access Defibrillators, expansion of First Responder Schemes and public health messaging.
- Further development of plans to introduce automated cardio pulmonary resuscitation (CPR) devices and other assistive technologies.
- Progressing plans for the 2015 Restart A Heart CPR training campaign to schools across Yorkshire and Humberside.
- Continuing engagement meetings with commissioners and the NHS TDA to progress formal approval of the Strategic Outline Case for the Hub and Spoke estate and operational delivery model. infrastructure.
- Reviewing director portfolios following substantive recruitment to the Chief Executive and Executive Director of Operations positions.
- Preparing for the coming CQC Quality Summit and publication of the Chief Inspector of Hospitals report on the outcome of the January 2015 inspection

4. Executive Team Reports

4.1 Chief Executive

- Following an assessment process in April and May of this year our EOC, PTS, NHS111 and ICT functions have successfully achieved certification for the ISO 22301, the International Standard for Societal Security, Business Continuity Management Systems. They join the Trusts' Resilience Department which gained certification to ISO22301 in April 2014.
- The Trust is continuing to work with our lead commissioner (Wakefield CCG) to progress joint quality and performance improvement initiatives and progress a region wide commissioning strategy for ambulance services. As part of this work the Executive Team will be meeting CCG Chief Operating Officers on 1 June 2015 to discuss future plans.
- The Hub and Spoke Project Team were invited to Leeds Overview and Scrutiny Committee to present details of the new Manor Mill Resource Centre and future plans for Gildersome Ambulance Station. Shelley Durant, A&E Operational Change Manager for Hub & Spoke, provided details of the consultation process and the improvement to facilities. The councillors expressed support for proposed changes.
- Dr Philip Foster (Medical Director NHS111 and Urgent Care), Angela Harris, (Lead Nurse Urgent Care) and I visited South Western Ambulance Foundation Trust at the end of March to see their Urgent Care Centre at Tiverton Community Hospital and NHS111 and 999 control centres. The visit provided useful insight into how the ambulance service can best respond to the opportunities and challenges contained within the NHS England 5 Year Forward View strategy document.
- Steve Page (Director of Standards and Compliance) and I met with Gail Cartmail Assistant General Secretary at the trade union Unite as part of the steps agreed to formal re-recognition. The meeting was open and constructive and discussed the concerns raised by Unite the Union in the media over the last year. It was agreed that both parties will continue to work together to support the further development of our service, focused on the delivery of high quality, responsive care for patients and a positive working environment for staff.
- The YAS Forum met at the West Yorkshire Police Training and Development Centre, Wakefield on 12 May. The meeting saw a demonstration of collaboration between the three blue light services with a reconstruction of police, fire and ambulance services response to road traffic accident. The meeting also included a presentation from Ian Walton, Associate Director of Resilience and Special Services, on

the Tour de Yorkshire and an overview of the draft YAS One Year Operating Plan 2015-16.

- Vice Chairman Pat Drake, Executive Director of Operations, Dr David Macklin and Locality Director Paul Mudd, along with current and former operations staff, represented the Trust at the Bradford City Fire 30th Anniversary Commemoration Event in Centenary Square, Bradford on 11 May to remember the 56 victims of the stadium fire 30 years ago. The families affected by the disaster were joined by local dignitaries, representatives from all the emergency services and many football fans to remember the 56 people who died in the tragedy.
- Three members of YAS staff were nominated in this year's Yorkshire Women of Achievement Awards, Tasnim Ali, Service Planning and Development Manager for Calderdale, Kirklees and Wakefield, Emma Scott, Community Defibrillation Officer for South Yorkshire, Calderdale, Kirklees and Wakefield and Liz Harris, Clinical Development Manager, South. The awards ceremony took place at the Royal Armouries in Leeds on 15 May 2015, with the event raising funds for the Sue Ryder charity.

4.2 Operations Directorate

- 2014/15 outturn was:-
 - Red 1 69.92%;
 - Red 2 69.35%.
- April performance showed a significant improvement with MTD figures:-
 - Red 1 74.77%;
 - Red 2 72.64%.
- Trajectory for 2015/16 has been produced with significant engagement across the Trust. Initiatives to uplift performance throughout the year from the baseline position are detailed in the trajectory and will be tracked on a weekly basis through Spring into Action meetings.
- Spring into Action continues to focus on the short term measures to improve our response to patients but is also identifying some of the more sustainable initiatives for continued performance improvement. In particular work around forecasting and capacity planning is well under way.
- Modelling work with ORH continues and we anticipate to have final results by the beginning of Quarter 2.
- Lightfoot work has commenced and initial recommendations have been received. Daily download of information to Lightfoot to drive specific performance improvement commences 18th May.
- The Forum report has been received and an action plan is being finalised.

Resilience and Special Services

- Successfully completed our part in the Tour de Yorkshire, receiving thanks from NHS partners.
- ISO certification was obtained for :-
 - Resilience;
 - PTS;
 - NHS111;
 - ICT;
 - EOC.
- Bradford City Fire Service of Remembrance 30 year anniversary was attended by the Vice Chairman Pat Drake and Dr David Macklin. Several members of operational staff along with Police and Fire service colleagues formed part of a Guard of Honour during the service.

IPR Section 2 (A&E Performance)

	March	April
Red1	73.54%	74.77%
Red2	72.33%	72.64%
Combined	72.41%	72.78%

March IPR Narrative

- RED 1 performance was 73.54% an increase of 2% on February 2015. RED activity was up by 5% on March 2014 Actions being developed as part of the Spring in to Action Group focusing on Demand, Resources and Efficiency.
- RED 2 performance 72.33% an increase of 2.3% on February 2015. There was an increase in RED demand of 5% on March 2014 Actions being developed as part of the Spring in to Action Group focusing on Demand, Resources and Efficiency. Abstractions remain high lowering base line operational hours. A large number of hours lost to Turnaround issues at many of the large acutes across the region.
- Green 2 Performance was 77.79% Improvements will form part of work of the Spring in to Action. Abstractions remain high lowering base line operational hours. The Clinical Hub supporting in assessment of G2 calls to improve response time and give comfort calls to those who have a prolonged response time.

April IPR Narrative

- RED 1 performance was 74.77% an increase of 1.2% on March 2015. The target of 75% was missed by 4 details. RED activity was down by 3% on April 2014 however, performance was significantly improved in April 15 compared to 2014. Actions being developed as part of the Spring into Action Group focusing on Demand, Resources and Efficiency.
- RED 2 performance was 72.64% an increase of 0.5% on March 2015. There was a decrease RED demand of 3% on April 14. Actions being developed as part of the Spring in to Action Group focusing on Demand, Resources and Efficiency. Abstractions remain high and removal of the incentive schemes has lowered the base line operational hours.
- Green 2 Performance was 77.38% Improvements will form part of work of the Spring in to Action. Abstractions remain high lowering base line operational hours. The Clinical Hub supporting in assessment of G2 calls to improve response time and give comfort calls to those who have a prolonged response time.

4.3 Clinical Directorate

- Paramedic Pathfinder training has been completed in West Yorkshire and, following the introduction of the Clinical App, the use of Paramedic Pathfinder has significantly increased. This will assist in fulfilling the CQUIN requirements for 15/16. Implementation has now moved to Hull, associated with ePRF rollout, with training being provided by the Clinical Directorate and 'light duties' staff from A&E Operations.
- Positive feedback has been received from a number of receiving centres following the introduction of the sepsis care bundle, involving hospital pre-alert and the early administration of intravenous fluids following recognition of potential sepsis using the National Early Warning Score (NEWS) and the YAS sepsis screening tool.
- Work is progressing well in securing the non-recurrent UCP schemes funded from SRG monies last year, including interest in providing a new scheme in Scarborough. Mental Health nurses in EOC and the Frequent Callers management programme are both now substantively funded from the core contract permitting recruitment to posts which will assist in providing the most appropriate dispositions for our patients. YAS solutions to the NHS England eight high impact interventions required of SRGs have been developed through the Urgent and Emergency Care Development Group to help inform their responses.

- Following the recruitment of Richard Pilberry to the post of Research Paramedic YAS has become the second highest recruiting organisation to the AIRWAYS2 research study. Plans are being developed to recruit a second Research Paramedic to assist with the RIGHT2 trial due to commence in September. Two Intellectual Property Scouts have been identified in Business Development, with further recruitment ongoing from all areas of the Trust, and Medipex will be providing training to the Scouts in June.

IPR Exceptions

- Whilst ROSC rates remain poor in comparison with other Ambulance Services, we consistently continue to achieve the highest Survival to Discharge rates following out of hospital cardiac arrest which is the most clinically significant indicator.
- Continued analysis of the STEMI 150 data demonstrates that YAS is only responsible for a small proportion of the 150 minutes breaches with all cases reviewed and learning identified throughout the patient journey.

4.4 Standards and Compliance Directorate

- Care Quality Commission – The Trust received the draft report on 18 May from the inspection conducted in January 2015. Our comments on points of accuracy need to be returned to CQC by 2 June. A Quality Summit to discuss key findings and actions with Trust stakeholders is arranged for 15 June.
- Hillsborough – The Trust has continued to contribute actively to the inquest process and to plan for the key stages ahead. Recent proceedings have included the report from the independent ambulance expert witness, and evidence in relation to each of the individual victims has now commenced.
- NHS 111 – We are continuing to hold discussions with commissioners about the plans and funding for NHS 111 and West Yorkshire Urgent Care services for 2015/16.
- Freedom to Speak Up – Following publication of the national report, the Department of Health has issued a consultation on implementation of key recommendations. Within the Trust, we are reviewing our current systems and processes for highlighting and responding to staff concerns. We are also taking stock of best practice in other NHS Trusts around the country, to inform our implementation plan. A working group is being established to support implementation of any changes.
- Service Transformation Programme – work has continued on the Trust's Urgent and Emergency Care Strategy, which will provide the overall context and direction for the transformation programme over the next 5 years. This will be presented for discussion, along with the key work programmes at the June Board Development Meeting.

IPR

- NHS 111 – Call answer performance slightly below target for the month, reflecting increased demand for the service, including significant demand over the bank holiday period. Staffing numbers and profiles reviewed for next quarter to ensure alignment to demand. Discussions with commissioners about demand increases are ongoing as part of the annual contract round. The warm transfer target for follow up with a clinician remains challenging and is subject to review as part of the national development of the NHS 111 service. A local KPI agreed with commissioners measures the percentage of callers managed by clinicians within 2 hours and this is currently at 87.5%.
- Complaints and concerns - The number of complaint responses taking longer than 25 days remains higher than desired, but the position has improved over the last 2 months, following changes to the complaints policy and procedures and integration of EOC complaint management into the Patient Relations Department.
- Safeguarding training - The Safeguarding team is working with managers to prioritise the completion of Safeguarding Level 2 refresher training and the completion rate has continued to increase month on month from January 2015 and is now at 78% overall.

4.5 People & Engagement Directorate

Human Resources

- Recruitment to core services continues to be a key focus of the Human Resources team. During the last quarter of 2014/15 (January – March 2015) there have been 159 (122.55 wte) new starters into the Trust, predominantly into A&E Operations, 111 ad PTS.
- Paramedic recruitment continues to be a key priority. The dedicated assessment event at Lifewise in April attended by the Chairman and Chief Executive team saw 30 paramedics (both newly qualified and currently registered), being offered conditional officers of employment with the Trust. In addition, members of the HR team and A&E Operations also met with the Business Manager from Flinders University, Adelaide, Australia in April to explore the possibility of an overseas recruitment drive for paramedics to Australia and the recruitment team are now at the early stages of developing an overseas recruitment campaign for members of the Trust in September of this year.
- The sickness absence rate for the Trust for April 2015 has reduced to 5.57%. At the last Trust Board meeting, the Associate Director of HR was asked to undertake a 'deep-dive' on a service area to drill down in particular into the following aspects of absence management:-

- Long-term sickness and the increase in this overall;
 - The reasons for sickness absence and what this may tell the service about the area concerned;
 - Whether managers are adhering to the timeframes set out in the Trust's absence policy;
 - Whether there are patterns and trends within the data which need to be explored;
 - The contribution of the OH service in responding to sickness absence levels.
- It has been agreed that 111 will participate in the deep-dive exercise and work is now underway between the 111 management team and HR which will be presented to the Quality Committee in July.
 - The workforce plan for service areas continues to be developed and in particular awaits the outcome of the current work in PTS under the Darwin programme and the ORH recommendations into A&E operations. The latter was the key focus of the workforce planning session at the Board Development day on 28 April 2015.
 - The newly formed Strategic Workforce Group has held two meetings since February. A priority for the group is the development of a career framework for staff developing through the organisation from apprentices through clinical and non-clinical career pathways, which will also be used as a recruitment aid for future campaigns. All service areas are represented on the Strategic Workforce Group and a key benefit is the sharing of service 5-year workforce plans with other service and corporate areas, to ensure that workforce and service plans, particularly for support services are aligned to the workforce plans of front-line operational services.
 - The last couple of months have seen significant activity in the move towards re-recognition of Unite and GMB and the recognition of the RCN. Of particular note have been the management and joint union training days facilitated by ACAS, leading to a final joint day for the Trust's senior managers and staff-side colleagues in early June. The necessary facilities agreement is close to being signed-off with staff-side colleagues and the first meeting of the Trust's JSG with attendance from Unite, GMB and the RCN took place in early May.

Organisational Effectiveness and Education

- The Education and Standards Team are fully committed delivering the agreed training plan for 2015 – 16. A key part of this is the introduction of internal courses to allow Bands 3 and 4 staff to enter the paramedic pipeline and to progress initially to EMT 2 level.
- A programme of work is in place with Zeal Solutions to establish how the organisation can increase staff engagement and improve employee

wellbeing, refresh the Trust's values and develop an agreed set of behaviours for the organisation and strengthen leadership.

- The YAS Cultural Audit Steering group and Zeal have now completed the development of a survey tool. The survey is titled 'Understanding the Quality of Your Working Life' and was circulated to all staff during the last week.
- It is highly important that staff see the transparency of the full process and they need to be assured that there will be real and tangible actions being undertaken as a result of this survey. Cultural improvements are required to ensure that we are able get the best out of our staff and to be able to retain high quality and dedicated staff in what will be an increasing competitive employment market.
- Two BME staff support network meeting have taken place in Batley and Rotherham. These meeting were jointly chaired by Ian Brandwood and Tasnim Ali, and it gave staff an opportunity to air their views. As a result a number of issues have been resolved including the development of a prayer guidance document.
- A new Workforce Race Equality Standard (WRES) was introduced on 1st April 2015 for NHS Trusts. A technical guidance document for the WRES was published in March 2015. The co-authors of this document Roger Kline and Ruth Passman explain the rationale for change, the research conducted and how it will link to the equality frame. The full document can be found here <http://www.england.nhs.uk/wp-content/uploads/2015/03/wres-technical-guidance-2015.pdf>
- To ensure effective implementation of this new standard a steering group has been formed. The group are to achieve the following WRES targets:-
 - 1st July 2015 – Publish baseline data, identify gaps and develop an action plan;
 - July 2015 – March 2016 – Implement action plan;
 - April 2016 – Baseline comparison to April 2015 data;
 - 1st May 2016 – Publish to commissioners, on Trust Website, share with Board and staff.
- An update will be provided to the Trust Board in the Autumn.

IPR Section 4 Workforce

- Whilst sickness absence remains above the Trust target of 5%, the reduction to 5.57% represents the lowest level of absence since October 2013 and is 1.01% lower than for the same period last year.
- Operations and NHS 111 both show significant improvement.
- Continued adherence to the policy is required.

- PDR completion rates rose slightly to 73.73% from 72.83% last month. 4 Directorates, Chief Executives, People and Engagement, Operations and the Clinical Directorate remain below the Trust's 75% target. This may be due to appraisals expiring at financial year end and a slight delay in new appraisals being undertaken.

4.6 Finance & Performance Directorate

- 2015/16 contracts for A&E and PTS have been or are very close to finalisation. Contract Negotiations are ongoing regarding NHS 111 with resolution expected in the next few weeks. There are also ongoing negotiations with Commissioners regarding the development and continuation of a number of UCP Schemes.
- Business Intelligence (BI) are currently working with Iain Bell from IMAS on the development of the IPR and data warehouse. The BI team are also delivering improved forecasting modelling for operations and ensuring contract reports are in line with any new 2015/16 contractual requirements.
- The ICT team are continuing to support a number of projects including:-
 - An Airwave terminal upgrade which will replace the existing Airwave handheld with the latest technology;
 - PDA Rollout – The ICT team has started rolling out the new PTS Smart devices with new Apps to replace the existing PDA. This will provide staff flexibility to use email, eLearning and access intranet/internet;
 - Adastra - ICT have successfully negotiated and migrated GPOOH to the new Adastra hosted solution 6th May;
 - Telematics - 84% of vehicles have been fitted with the telematics devices and system training for the key users has been completed.
- Procurement have finalised the Trusts' new five year Procurement Strategy which was supported by F&IC and is going forward to Trust Board for sign-off in May. The Procurement team is heavily engaged in contract support and procurement activity across the Trust which is ensuring we are moving forward as quickly as possible whilst improving the Trusts compliance with the procurement regulations.
- Estates Department staff continue to support the development of the Hub and Spoke station model including development of strategic enabling plans such as land disposal. As reported previously work has begun on the Springhill 2 building at YAS HQ to refurbish and upgrade the Reception area and parts of the Emergency Operations Centre (EOC). There is currently minor slippage of two weeks to the programme, due to issues with steelwork delivery. The revised handover date is currently 14th August although the contractor endeavours to pull back the slippage. The purpose of the works is to significantly improve staff working conditions and environment.

- The Fleet Team continue to be fully engaged with Operations colleagues in the “Spring into Action” initiative. This includes a daily focus on; vehicle availability, faster turnaround of vehicle issues to keep staff on the road, vehicle movements and co-ordination to ensure the fleet is in the right place, reactive to changes in demand on day and providing improved cover across the weekends. Other updates include:-
 - the 47 leased PTS Vehicles have been ordered from O&H, with the build programme commencing 10th July. The aging PTS fleet continues to be challenging;
 - The 20 urgent tier vehicles from West Midlands are now arriving at Unit M, and we are just awaiting delivery of Airwave equipment;
 - Discussions are continuing regarding the new parts contract, fuel card arrangements and the arrangements for 24/7 breakdown cover;
 - The department continues to explore ways of extending working hours to provide better levels of cover at the workshops to support operations;
 - The PTS telematics project continues with all vehicles nearly fitted;
 - VOR reporting indicates that there are improvements in vehicle maintenance/repairs.
- The Finance Team have been focused on the 2014/15 year end accounts and 2015/16 plan/budgets. The final accounts have progressed on time with the Audit Committee review being held on the 29th May with final papers going to both Audit Committee and Board on the 2nd June for final sign off. The Finance team has also now submitted to the NHS TDA the 2015/16 financial plan in line with the £1.15m surplus plan approved by the Board at its meeting on 28 April 2015. I am pleased to report that the month 1 position is consistent with this plan.

IPR Section 5 (Finance)

- The Trust’s Month 1 surplus is £469k against plan of £423k and we are reporting an EBITDA of £1.502m (7.5%) which is slightly behind the plan of £1.519m (7.6%).
- A penalty of 2% per target per month is applicable if cumulative performance for the year is not achieved, however this is capped at a maximum of 2.5% across all targets. The profile for month 1 is consistent with the trajectory agreed with commissioners, and therefore no Red performance penalties have been applied to the month 1 position.
- This position includes adverse performance within A&E of £185k, mainly driven by overtime and subsistence payments. Fleet are showing an adverse position of £106k predominantly due to maintenance costs and 111 are showing an adverse position of £46k due to overtime and consultancy fees. This is offset by depreciation,

savings on vacancies across the Trust and under utilisation of reserves.

- Also to note that at Month 1 it has been assumed that all costs associated with Hillsborough inquest will be reimbursed in line with NHS TDA expectations.

5. Recommendation

- 5.1 That the Trust Board has sufficient assurance on the activities of the Executive Team and Trust Executive Group during this period.

That the Board notes and discusses the variances contained within the April 2015 IPR report, highlighted in the Executive Directors reports.