



## Minutes of Joint Meeting of Finance & Investment / Quality Committees

**Venue:** Kirkstall & Fountains, Springhill 1, WF2 0XQ  
**Date:** Thursday 5 February 2015  
**Time:** 1300 hours  
**Chairman:** Pat Drake

### Attendees:

|                 |      |   |
|-----------------|------|---|
| Pat Drake       | (PD) | Deputy Trust Chairman/Non-Executive Director (Chairman) |
| Dr Elaine Bond  | (EB) | Non-Executive Director                                  |
| Erfana Mahmood  | (EM) | Non-Executive Director                                  |
| Mary Wareing    | (MW) | Non-Executive Director                                  |
| Rod Barnes      | (RB) | Interim Chief Executive                                 |
| Ian Brandwood   | (IB) | Executive Director of People & Engagement               |
| Alex Crickmar   | (AC) | Interim Executive Director of Finance & Performance     |
| Dr Dave Macklin | (DM) | Interim Executive Director of Operations                |
| Steve Page      | (SP) | Executive Director of Standards & Compliance            |
| Karen Warner    | (KW) | Associate Director of Quality & Nursing                 |

### Apologies:

|                |      |                                   |
|----------------|------|-----------------------------------|
| Barrie Senior  | (BS) | Non-Executive Director (Observer) |
| Dr Julian Mark | (JM) | Executive Medical Director        |

### In Attendance:

|                  |      |   |
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| John Nutton      | (JN) | Non-Executive Director – Designate (Observer) |
| Anne Allen       | (AA) | Trust Secretary (Observer)                    |
| Dr Stephen Dykes | (SD) | Associate Medical Director                    |
| Ben Holdaway     | (BH) | Locality Director, EOC                        |

**Minutes produced by:** (MG) Mel Gatecliff, Committee Services Manager

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|    | The meeting commenced at 1300 hours.  |               |
| 1. | <b>Introduction to meeting</b><br>PD welcomed everyone to the third joint meeting of the F&I and Quality Committees.  |               |
| 2. | <b>Apologies / Declaration of Interests / Previously approved minutes of 12 June 2014 Joint Committee Meeting</b><br>Apologies were noted as above and declarations of interest would be considered during the course of the meeting. There were no further matters arising from the previously approved minutes of the joint meeting held on 12 June 2014. |               |

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| 3. | <p><b>Overview of 2015/16 CIP Schemes / Quality Impact Assessment Update / Flowchart / Governance Process</b></p> <p>AC provided a progress update on the 2014/15 CIP schemes and an overview of the key 2015/16 schemes and identified risks.</p> <p>He stated that, following the mobilisation of a number of reserve schemes, the organisation was expecting at least 100% of CIP achievement, adding that the papers circulated prior to the meeting also included details of the following year's schemes.</p> <p>AC further stated that the main risks to the 2014/15 CIP plan were in respect of PTS and A&amp;E. These risks, which included the links to ORH and the workforce modelling work, were currently being assessed from both a finance and quality perspective.</p> <p>SP stated that the potential impact of the CQC inspection also needed to be considered.</p> <p>AC confirmed that a risk assessment would be carried out prior to the next submission to the TDA, adding that a meeting was due to take place shortly to work up the plans in more detail. Details about the on-going contract negotiations would be discussed later at that day's F&amp;IC meeting.</p> <p>KW stated that details of the process update were shown in the timelines describing the process in Appendix 2. Minor revisions had been made with the aim of increasing the amount of accountability and ownership of the schemes at a local level.</p> <p>KW further stated that the main areas to highlight in terms of Quality Impact related to A&amp;E Workforce, Skill Mix, Meal Break Payments and Field Operations Re-organisation, details of which were shown in section 4.4 of the report.</p> <p>Actions in place to mitigate the risks were outlined in section 4.5, with the Trust continuing to track all complaints closely.</p> <p>AC provided a short summary of the proposed 2015/16 schemes.</p> <p>In terms of the PTS CIP plan, AC stated that schemes were currently being identified in line with the work undertaken with Curzon. These schemes were likely to include a number of elements including a review of Extra Contractual Referrals (ECRs), auto-planning, increased use of telematics, expansion of the Voluntary Car Scheme and workforce efficiencies, etc.</p> <p>AC further stated that the sections of the 2014/15 PTS CIP plan which had not been delivered would be rolled over into the 2015/16 plan.</p> |        |

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| <p>SP stated that, in terms of A&amp;E, the issue around the monitoring of skill mix would be key to the success of the 2015/16 CIP plan. The key PTS measures would need to be related to the implementation of cost saving actions to ensure an appropriate balance between making savings and the safe delivery of the service was monitored.</p> <p>AC stated that management changes in Fleet and Estates would impact both on quality and on the broader cross-department view.</p> <p>PD acknowledged that local ownership was key to the success of the plan and asked whether there was an overview QIA.</p> <p>KW replied that an initial QIA was carried out as part of the development of every business case. The process would then be signed off at Executive level with Executive sponsorship. As SP, JM and she received everything for sign off they all had an overview of all of the schemes.</p> <p>AC stated that the CIP Management Group also considered how individual schemes were inter-related and linked together.</p> <p>PD stated that the workforce plans had been discussed at that morning's Quality Committee meeting. She asked whether the Trust was totally confident that any changes to the plan could be costed out, whether the organisation was still able to deliver on the CIP and whether there would be any costs associated with the new plan.</p> <p>AC replied that Finance was working with DM and his team in Operations to consider financial implications, the impact of the CIP, etc. Key risks would need to be assessed and appropriate reserves set aside. Changes would not be implemented immediately but over a period of time and there remained a need to carry out more detailed work as the plan developed through the ORH work, etc.</p> <p>AC stressed that compared to the overall national picture where many organisations were struggling YAS had done well in relation to its 2014/15 CIPs. Much work had already taken place to improve the CIP process and plan during the current year so the Trust was moving in the right direction although it was recognised that there remained some way to go.</p> <p>RB stated that the 3-5 year plan needed a complete rework on the basis of the transformation schemes in both A&amp;E and PTS.</p> <p>AC agreed that the plan needed to be much more closely linked to the Service Transformation plan.</p> <p>EB asked whether the Trust had moved away from the arbitrary 25% reserve schemes.</p> |               |

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| <p>AC replied that the organisation would aim to have as many reserve schemes as possible to provide contingency whilst recognising that it would be increasingly more difficult to identify and deliver such schemes going forward.</p> <p>AC further stated that he had requested and received advice from trusts that were further down the FT journey than YAS.</p> <p>PD asked whether the process had been made more difficult as a third of FTs now found themselves in financial difficulties.</p> <p>RB stated that, although there was a recognition of the current challenging environment, the process had not been made any easier.</p> <p>MW stated her belief that the Trust's call centre integration should be a priority for the following year and asked whether a business case was being developed in this respect.</p> <p>BH replied that an options appraisal would be required before the development of the robust business case.</p> <p>MW asked what the likely timescales were for the changes.</p> <p>SP replied that, as more work was required on the scope of the work, etc, progress on integration beyond the Clinical Advisor roles was unlikely to take place during 2015/16.</p> <p>DM stated the option that the Trust chose would clearly determine the pathway and timescale for implementation. It was agreed that, during the course of the option appraisal, the Trust would need to be clear about actual benefits realisation, etc.</p> <p>It was noted that the proposed integration of the clinical hub with clinical advisors in NHS 111 was a much more discreet piece of work which could be looked at in-year.</p> <p>The meeting noted the update and the fact that the Trust was in a good position in relation to its CIP schemes following a difficult year.</p> <p><b>Approval:</b><br/> <b>The Joint Meeting of the Quality and Finance &amp; Investment Committees noted the:</b></p> <ul style="list-style-type: none"> <li>• <b>CIP position at the end of Month 9 and the actions being taken to achieve the CIP plan for 2014/15;</b></li> <li>• <b>steps being taken to improve the governance of CIP delivery and quality impact assessment;</b></li> <li>• <b>plans for the delivery of the 2015/16 CIP requirement and risks associated therein.</b></li> </ul> |               |

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| <p><b>4. Service Transformation Update</b></p> <p>SP provided an update on developments, issues and risks in relation to the Service Transformation Programme for the current year. He stated that the Service Transformation Programme priorities for the current year were:</p> <ul style="list-style-type: none"> <li>• Hub and Spoke;</li> <li>• OD and Leadership;</li> <li>• Urgent Care.</li> </ul> <p>SP confirmed that the hub and spoke workstream had progressed broadly according to plan, with a focus on Manor Mill, the opening of which had been a key milestone which provided the initial proposed hub and spoke pilot site.</p> <p>To date the workstream focus had been on the development of the hub and spoke concept and the establishment of a hub and spoke team to build the Strategic Outline Case (SOC) and a subsequent full business case.</p> <p>The SOC was reviewed by the Trust Board in December 2014 and next steps would include the development of the Outline Business Case (OBC) costs and the make ready business case for Manor Mill.</p> <p>SP stated that OD and leadership was a multi-faceted piece of work. Section 3.9 onwards of the report outlined some of the developments in year. A number of milestones within the Service Line Development project had slipped due to recruitment difficulties, etc. The issue had been reported through TEG meetings and was being reframed as a priority for 2015/16. It was anticipated that it would be taken forward as a separate workstream in 2015/16, with additional impetus from dedicated project management support.</p> <p>SP stated that the early part of the Urgent Care programme was focused around securing SRG funding for pilot development. This had been a reasonably successful exercise around the Urgent Care Practitioner and frequent caller schemes.</p> <p>SP stated that the roll out of the Paramedic Pathfinder project was broadly progressing to plan across predetermined CCG areas with CQUIN reports submitted in line with the reporting schedule. A risk to the achievement of the associated CQUIN had been identified in relation to the level of reported usage of the pathfinder tool and options for mitigating action were currently being considered.</p> <p>A discussion took place about appropriate mitigations.</p> <p>SP confirmed that the NHS 111 national pilots and York SPA pilot had been implemented as planned. In terms of telecare, the Trust had reached the stage of identifying a potential partnership with the item to be discussed in more depth at that afternoon's F&amp;IC meeting.</p> |               |

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| <p>PD asked what the impact of the non-recurrent funding mentioned in section 3.21 would be going forward.</p> <p>AC stated that discussions were on-going with Commissioners in relation to 2015/16. The intention was for trusts to receive funding upfront rather than as winter money in year as this would be more cost effective and would enable more effective planning.</p> <p>PD stated her belief that an organisation could not invest in upskilling its workforce if it was not guaranteed to receive money.</p> <p>DM agreed with PD, adding that reactive expenditure such as short notice overtime was one of the most inefficient uses of money which underlined the urgent need for a coherent overall workforce plan.</p> <p>PD noted that further progress had been made in relation to the Bright Ideas scheme and improvement network and asked how this would link in with the quality improvement work.</p> <p>SP stated that although some people involved in the transformation and other project work had been through training this had not been as systematic as it could have been. The Trust would therefore need to be more structured in its appointments to projects going forward.</p> <p>SP further stated that, as the magnitude of the change programme over the next few years was greater than initially envisaged it would need to further expand.</p> <p>SP provided a summary of the service redesign programme for 2015/16 under the headlines of:</p> <ul style="list-style-type: none"> <li>• Hub and Spoke;</li> <li>• Call Centre Integration;</li> <li>• The Intelligent Ambulance;</li> <li>• PTS Transformation;</li> <li>• The A&amp;E Service Delivery Model, a key scheme which was wrapped up the A&amp;E improvement plan and the sustainability of A&amp;E performance.</li> </ul> <p>SP further stated that the OD and Leadership workstream was also key as it cut across the others.</p> <p>In terms of enabling strategies and plans work had begun in TEG on a new Urgent and Emergency Care Strategy which was due to be completed in early 2015. This would inform developments in the A&amp;E Delivery Model, A&amp;E Workforce Education and Development and other workstreams.</p> <p>SP confirmed that leads had been identified for most of the programme and work was now under way to identify the project management requirements which would lead to the production of an overall proposal around resources, etc.</p> |               |

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| <p>SP stated that a new Associate Director of Transformation, Nigel Hopps (NH), had been appointed on a 12-month interim contract. NH would be supported by an assurance manager who would have an overview of the whole programme.</p> <p>In addition, consideration was being given to transferring the management of CIPs into the programme at an appropriate point, with the pros and cons of this action to be considered at a meeting the following day.</p> <p>MW stated, as a regular attendee at TEG Transformation meetings, it was her belief that the developments proposed for the following year were the right ones. It was her further belief that now was the right time to integrate CIP management with the overall transformation management which would benefit from some of the rigours that had been applied to CIP management over the past 12 months.</p> <p>MW added her view that transformation resources should be justified by the business case for the transformation itself.</p> <p>SP agreed and noted that cases would be brought forward for individual schemes at the appropriate time.</p> <p>EB stated that SP's update had provided a great deal of clarity. However, as the meeting was attended by a Joint Committee, it was her belief that the only thing missing from the paper were finer details about the financials.</p> <p><b>Action:</b><br/> <b>SP to include 'financials' in the July update report to the Joint Committee.</b></p> <p>AC stated that some projects would have a higher level of investment than others. For example, the intelligent ambulance might receive investment from the Commissioners whereas other developments such as the hub and spoke would need to be Trust-funded.</p> <p>PD asked when a decision would be made in relation to the integration of CIP and Transformation management.</p> <p>SP replied that although NH would provide his input, ultimately it would be a TEG decision further down the line.</p> <p><b>Approval:</b><br/> <b>Quality Committee and Finance &amp; Investment Committee noted and commented on the developments, issues and risks outlined in the update and were assured with regard to the Service Transformation Programme management and resource arrangements and actions.</b></p> | <p><b>SP</b></p> |

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| <b>5.</b> | <p><b>Closing Comments</b><br/> PD stated that, although the meeting was only an hour long, it was a very important meeting.</p> <p>It was her belief that the papers were of a higher standard than those presented at previous meetings because the Trust now understood what it was trying to achieve.</p> <p>EB and PD agreed that their respective Committees had been given relevant assurance that the current process was working for them.</p> <p>As there were no other comments PD thanked everyone for sparing the time to attend the meeting.</p> <p>The meeting closed at 1345 hours.</p> |               |
| <b>6.</b> | <p><b>Date and Time of Next Meeting:</b><br/> 1300-1400 hours<br/> <b>9 July</b> 2015, Kirkstall and Fountains, Springhill 1, WF2 0XQ</p>   |               |

**CERTIFIED AS A TRUE RECORD OF PROCEEDINGS**

\_\_\_\_\_ **CHAIRMAN**

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