



Annual General Meeting

Venue: The Thackray Medical Museum, Beckett Street, Leeds, LS9 7LN

Date: Tuesday 30 September 2014

Time: 1115 hours

Chairman: Pat Drake

Present:

Board Members:

Patricia Drake	(PD)	Deputy Chairman and Non-Executive Director (Chairing)
David Whiting	(DW)	Chief Executive
Dr Elaine Bond	(EB)	Non-Executive Director
Erfana Mahmood	(EM)	Non-Executive Director
Barrie Senior	(BS)	Non-Executive Director
Mary Wareing	(MW)	Non-Executive Director
Rod Barnes	(RB)	Deputy Chief Executive and Executive Director of Finance & Performance
Ian Brandwood	(IB)	Executive Director of People & Engagement
Dr Julian Mark	(JM)	Executive Medical Director
Steve Page	(SP)	Executive Director of Standards & Compliance

Apologies:

Della Cannings (DC) Trust Chairman

In Attendance:

John Nutton	(JN)	Non-Executive Director (Designate)
Anne Allen	(AA)	Trust Secretary, YAS
Sheila Barnes	(SB)	Healthwatch, Doncaster
Hilery Brearly	(HB)	Basingstoke & North Hampshire NHS FT
Jayne Brown, OBE	(JB)	Senior Associate, Good Governance Institute (GGI)
Hazel Chatwin	(HC)	Healthwatch, North Yorkshire
Robert Edmondson-Jones	(REJ)	Rebor Ltd
David Ita	(DI)	Healthwatch, North Yorkshire
Trevor Kent	(TK)	Member of the Public
Sarah Laidlaw-Moore	(SLM)	West Yorkshire Fire and Rescue
Diane McKerrachor	(DMc)	Public Member
Daniel Mason	(DM)	NHS Sheffield CCG
Catherine Riley	(CR)	Calderdale and Huddersfield NHS FT
Helen Rowe	(HR)	Public Member

Katie Smith (KS) Harrogate and Rural District, CCG
 Rod Spratley (RS) YAS Forum Member, Public – South
 Richard Taylor (RT) Healthwatch, Leeds
 K S Virdee (KSV) YAS Forum Member, Public –West
 Ian Whitehouse (IW) Public Member
 Cl John Wilkinson (JW) North Yorkshire Police
 Andy Wood (AW) Overview and Scrutiny Officer, Wakefield Council
 Alison Wright (AWr) Public Member

Maria Amos (MA) Fundraiser, YAS Charitable Funds
 Andrea Broadway-Parkinson (ABP) YAS Expert Patient
 Jacqui Crossley (JC) Head of Clinical Effectiveness, YAS
 Ian Dixon (ID) Hazardous Area Response Team, YAS
 Rosie England (RE) PTS Administrator, YAS
 Elaine Gibson (EG) Head of Corporate Communications, YAS
 Anne-Marie Haigh (AMH) Quality and Risk Co-ordinator, YAS
 Steven Kitchen (SK) IMT Support Analyst, YAS
 Sharron Martin (SM) Community Defibrillator Officer, YAS
 Denise Moorwood (DMo) Community and Commercial Education Manager, YAS
 Jo Rawnsley (JR) Specialist Services Co-ordinator – Projects, YAS
 Ali Richardson (AR) Foundation Trust Membership Manager, YAS
 Hester Rowell (HR) Head of Stakeholder Engagement, YAS
 Chris Sharp (CS) Head of Leadership and Learning, YAS
 Neil Spencer (NS) Hazardous Area Response Team, YAS

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

The meeting was preceded by a presentation, between 1045 and 1115, which was open to all members of the public. ‘Acute Care Pathways’ was presented by Jacqui Crossley, Head of Clinical Effectiveness and was very well received by those present.

		Action
	The meeting commenced at 1115 hours.	
1	<p>Apologies / Declaration of Interests The Deputy Chairman welcomed everyone to the Annual General Meeting (AGM) of the Yorkshire Ambulance Service (YAS). She passed on her thanks to JC for a useful and informative pre-meeting presentation.</p> <p>Apologies were received as above and declarations of interest would be noted during the course of the meeting.</p>	
2	<p>Minutes of the AGM held on 24 September 2013 including Matters Arising not on the Agenda The minutes of the meeting held on 24 September 2013 were approved as a true and fair representation of the meeting.</p> <p>Matters Arising: There were no matters arising.</p>	

		Action
3	<p>Welcome from the Deputy Chairman of Yorkshire Ambulance Service</p> <p>The Deputy Chairman (PD) formally welcomed members of the public and representatives of partner organisations, YAS Forum members, volunteers and staff to the Annual General Meeting (AGM) of the Yorkshire Ambulance Service NHS Trust (YAS) and encouraged those present to stay on and attend the Trust Board meeting in Public later that day.</p> <p>The Deputy Chairman introduced herself and invited Board colleagues, both Non-Executive and Executive Directors, to introduce themselves to those present.</p> <p>She outlined the contents of the meeting’s agenda, which would look at the Trust’s achievements and performance during the 2013/14 financial year.</p> <p>The Deputy Chairman stated that 2013/14 had been an incredibly busy year and not without its challenges as the Trust embarked on a significant period of transformation.</p> <p>The Deputy Chairman stressed the importance of the process of on-going change and improvement if YAS was to meet the future needs of its patients and ensure it remained sustainable as an organisation. She stated that, whilst change always brought challenges with it, it also brought opportunities and new ideas, adding that the majority of YAS’ staff had accepted the developments and were working with the Trust on its journey.</p> <p>The Deputy Chairman stated that the Trust had a five-year Integrated Business Plan (IBP) which set out YAS’ priorities. These were to:</p> <ul style="list-style-type: none"> • improve the quality of patient care; • maintain the responsiveness of YAS’ services; and • ensure value for money. <p>She further stated that the Trust was very much focused on clinical effectiveness and saving more lives of patients suffering, for example, from a major trauma or cardiac arrest and improving outcomes for patients suffering a serious heart attack or stroke.</p> <p>Work was also under way to provide the right care for patients, first time, through improved telephone advice, appropriate referral of patients through clinical pathways and providing more care at home, where appropriate, to reduce the need to take patients to hospital. This was becoming known as ‘hear and treat’ and ‘see and treat’.</p> <p>The Deputy Chairman stated that YAS’ 999 service had delivered on its key performance indicators for the third consecutive year despite increased demand for the service.</p> <p>She further stated that YAS was very conscious of inconsistencies in the delivery of performance targets across the region.</p>	

The Trust was, therefore, working hard to better match resources to demand by, for example, reviewing some of its operational policies and processes.

Those changes were essential to improve patient care, secure long-term stability and protect jobs. YAS would have to ensure therefore, that, across all of its service areas it:

- delivered its contractual targets;
- improved outcomes for patients;
- met its financial targets; and
- was sustainable.

The Deputy Chairman stated that YAS' new NHS 111 urgent care service was now fully embedded across Yorkshire, the Humber, Bassetlaw, North Lincolnshire and North East Lincolnshire and was proving itself to be one of the better performing NHS 111 services in England.

In addition, YAS' Patient Transport Service (PTS), which carried out over 880,000 non-emergency journeys in 2013/14, had improved delivery against key performance indicators. It had been focusing on acquiring feedback from people who used and commissioned the service to keep its position in the marketplace.

The Deputy Chairman outlined the Trust's key priorities for 2014/15. These included:

- further improving clinical outcomes for key conditions;
- delivering timely emergency and urgent care in the most appropriate setting; and
- developing YAS' culture, systems and processes to support continuous improvement and innovation.

She stated that YAS was the largest single gateway to healthcare services across Yorkshire and the Humber. This placed the Trust in a key position to lead and support the urgent care agenda and co-ordinate pathways which would see healthcare services transformed, integrated and aligned to best meet the needs of the local communities.

Finding better and more appropriate ways to respond to the needs of YAS' patients, without necessarily sending an ambulance resource or taking them to hospital, would be essential so that YAS could continue to provide high-quality care to all its patients wherever and whenever they required the Trust's services.

The Deputy Chairman recorded her appreciation and recognition of the tremendous efforts of YAS' staff in caring for patients. She stated that the Trust was committed to recognising staff for their commitment, dedication and excellence and she was proud of the extraordinary lengths to which they went continuously, to ensure that they consistently delivered the best possible patient care.

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	<p>The Deputy Chairman further stated that YAS' annual 'WE CARE' Staff Awards and Long Service and Retirement Awards recognised the hard work and loyalty of staff going the extra mile, to put patients first and the values of the Trust into practice.</p> <p>She thanked YAS' staff and volunteers for all they did to care for the Trust's patients every day.</p>	
4	<p>Patient Story</p> <p>The Deputy Chairman stated that patient care was at the heart of the Trust's work. She explained that a patient story was provided at every Board meeting held in Public, either verbally or in the form of a filmed interview, to highlight the Trust's work and to learn about steps being taken to further improve its services and the knowledge of its staff.</p> <p>She further stated that it was important for the Board to hear about patients' experiences, which were integral to all of the Trust's work, to give Board Members something on which to reflect and from which to learn.</p> <p>The Deputy Chairman stated that the 'On the Edge' film, which was being shown as that day's patient story, was produced as part a multi-agency engagement project that the Trust's Head of Stakeholder Engagement, Hester Rowell, had run leading up to the Yorkshire and Humber Crisis Care Concordat Event in July 2014.</p> <p>The film was produced by a group called ChilyPep (Children and Young People's Empowerment Project), based in Sheffield, which works with young people (aged 16-25) with mental health conditions.</p> <p>About 20 young people had been communicated with through a mixture of one-to-one interviews and focus groups. Although a more detailed report would be produced, which drew on the key themes emerging as a result of the work, the film highlighted some of the key stories, mainly focussing on what young people wanted from local services.</p> <p>The Deputy Chairman stated that the learning for the Trust from this work included:</p> <ul style="list-style-type: none"> • everyone spoken to described positive experiences of ambulance care; • a common theme was the need to provide joined up support for mental health crisis and drug/alcohol issues; • the attitudes of professionals were as important as their actions; • even during a crisis, people wanted to know why things were happening to them and, if appropriate, to involve their carers in the decision making process; and • it was very important to avoid an 'us and them' divide between patients and professionals. 	

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	<p>She further stated that initiatives currently being developed by YAS, which would better support patients needing crisis mental health care and address some of the themes identified through this engagement work, included:</p> <ul style="list-style-type: none"> • mental health crisis triage service; and • new education and training. <p>The Chairman thanked everyone for listening to the patient story.</p>																
5	<p>2013/14 Annual Report and Accounts including the Quality Accounts</p> <p>The Chief Executive, DW, introduced the 2013/14 Annual Report. He stated that in spite of the many challenges faced by the organisation during the year progress continued to be made.</p> <p>A&E Performance</p> <p>DW stated that, in spite of a massive increase in demand, the Trust had achieved a third consecutive year of performance to the stringent national standards in A&E performance.</p> <table border="0" data-bbox="252 936 1101 1115"> <tr> <td>2013-14</td> <td>2012-13</td> <td></td> </tr> <tr> <td>Red (8-minute)</td> <td>Red (8-minute)</td> <td></td> </tr> <tr> <td>75.26%</td> <td>75.33%</td> <td>Target 75%</td> </tr> <tr> <td>Red (19-minute)</td> <td>Red (19-minute)</td> <td></td> </tr> <tr> <td>97.29%</td> <td>96.97%</td> <td>Target 95%</td> </tr> </table> <p>Ambulance Clinical Quality Indicators</p> <p>DW provided a summary update on the Trust's performance against the Ambulance Clinical Quality Indicators (ACQIs) during 2013/14.</p> <p>Upper quartile:</p> <ul style="list-style-type: none"> • Cardiac arrest - survival to discharge: due to some excellent joint working between YAS and acute trusts there had been a 43% improvement in cardiac arrest survival to discharge in 2013/14, which meant that 124 more patients were alive due to the high standard of care from YAS staff compared with the previous year; • Stroke care and transport to specialist care: with improvements including the speed with which rural patients were taken to the right care in one of the 14 specialist stroke centres in the region, which could mean the difference between life and death; • Re-contact rate - following telephone/on scene triage/care: improvements in re-contact rates had been seen in 2013/14, which historically had been one of YAS' poorest performing indicators. <p>Lower quartile:</p> <ul style="list-style-type: none"> • STEMI (ST Segment Elevation Myocardial Infarction, a type of heart attack) - care within 150 minutes; 	2013-14	2012-13		Red (8-minute)	Red (8-minute)		75.26%	75.33%	Target 75%	Red (19-minute)	Red (19-minute)		97.29%	96.97%	Target 95%	
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- Non transfer to A&E.

Although progress had been made in the above indicators, there remained more work to do, particularly in conjunction with YAS' partners.

Major Trauma

DW stated that 'Major Trauma' was a clinical priority for the whole of the Yorkshire health community and the Trust was starting to see improvements in reduced mortality. These included the use of stronger drugs to control pain, haemorrhaging, etc and improved co-ordination in control centres to ensure patients with major trauma were taken to the most appropriate specialist centres.

Resilience

DW stated that a lot of progress had been made in improving YAS' resilience systems. The introduction of ResWeb, which had been widely shared, provided a single point of access for YAS and all of the Trust's resilience partners.

He further stated that ResWeb had been critical when YAS had planned its support of the 2014 Tour de France Grand Départ. This successful event had been a wonderful advertisement for all of the Yorkshire-based emergency services and their partners.

NHS 111

DW stated that YAS' NHS 111 service had completed its first full year of operation in Yorkshire and the Humber, Bassetlaw, North Lincolnshire and North East Lincolnshire (ie 11.7% of the population of England). The service had taken 1,100,599 calls in 2013/14; 94.9% of which were answered within 60 seconds; and 8.6% of which were transferred to 999, which was one of the lowest transfer rates to 999 in England.

He further stated that, although the 111 service was performing well and receiving good feedback, there was still more which could be done to further improve the service. The Trust was therefore working hard to enhance the clinical delivery model for the future.

DW added his belief that the fact that an ambulance service delivered both the 999 and 111 services in the region was one of the main reasons for the success of the service. Other parts of the country, where the ambulance service did not have control of both access points, seemed to have experienced more problems.

Clinical Developments

DW provided an update on clinical developments during the year, which included:

- the development of national Paramedic Clinical Guidelines with Lead Paramedic, Mark Millins, playing a key role in this work;

- the further development of the Resuscitation Strategy;
- the introduction of the Emergency First Responder (EFR) Scheme in conjunction with Humberside Fire and Rescue Service in East Riding;
- the increased number of Community Public Access Defibrillators (CPADs) across the region;
- the introduction of the Paramedic Pathfinder, which was allowing more patients to be treated at home; and
- the introduction of Community Medical Units.

Awards

DW stated that it meant a lot to the organisation when its staff were recognised for their efforts and successes.

During 2013/14, the Trust had received a number of awards, including:

- national awards for two members of YAS' Emergency Operations Centre;
- a Fleet New Green Van Award; and
- a Patient Experience Network Award for YAS' Patient Experience Survey programme.

DW stated that YAS, as an organisation, was passionate about listening to patients, hearing what they had to say and acting on the information. Receiving the Patient Experience Network National Award in 2014 had therefore been particularly rewarding.

Looking Forward

DW stated that many of YAS' future plans were centred round the Urgent Care agenda with plans including:

- the introduction of Urgent Care Paramedics and Urgent Care solutions;
- the roll-out of the Electronic Patient Report Form (ePRF) and Paramedic Pathfinder;
- care coordination;
- further improvement of clinical outcomes; and
- a continued focus on YAS' workforce plan, which would need to be further adapted as more changes were implemented.

Financial Overview

The Executive Director of Finance and Performance, RB, presented a financial overview of 2013/14. He stated that the Trust's financial objectives for 2013/14 had been achieved. Headlines included:

- income of £233.4m, which was an increase of 10.3%;
- expenditure of £230.9m, which was an increase of 10.2%;
- financial surplus target of £2.6m was delivered against a very challenging backdrop (1.1% of income against 1.0% of income in 2012/13);
- The full regional roll-out of NHS 111, including all GP out-of-hours calls, was completed during 2013;

- Activity:
 - A&E attended 708,883 incidents;
 - PTS made 886,312 journeys, which was a small increase;
 - NHS 111 answered 1,100,599 calls as a result of the phased roll out with a total of around 1.4 million calls expected in the first full year of delivery;
- £13.7m Capital Expenditure (Capex) including the new £4.7m Hazardous Area Response Team (HART) facility;
- the re-launch of YAS' Charitable Fund which received donations of £33k and incurred £47k of expenditure, including the purchase of the Trust's first Community Medical Unit; and
- achievement of 97% of the Cost Improvement Plan.

RB confirmed that the Trust had received an Unqualified Audit Opinion and good feedback from the auditors.

He outlined details of key cash flow items and stressed that, because many of the services provided by YAS were open to competition, much of the Trust's income could not be guaranteed as the Trust moved forward towards being a Foundation Trust (FT).

RB stated that the Trust's retained surplus had grown steadily over the past four years reaching a total of £2.6m, net of impairments in 2013/14. This was a major achievement as many organisations in the NHS were currently struggling to deliver a breakeven position.

He further stated that, as an aspirant FT, there was an expectation that YAS would deliver a surplus of about 1% of turnover each year. The 2013/14 total of £2.6m was in line with that trajectory.

RB stated that the Trust's Cost Improvement Programme (CIP) was required to deliver savings of around 4-5% of turnover, which for YAS meant around £10m. Examples of CIPs included schemes around staff structures and services such as the introduction of schemes for treating patients at home.

RB presented a breakdown of YAS' 2013/14 Income and Expenditure. He stated that, like all NHS organisations, pay was the Trust's biggest cost base.

He stated that the Trust's Capital Programme for 2013/14 had been £13.8m, with the new HART facility the largest element of Capex expenditure. The purchase and refurbishment of the facility had cost £4.7m, which had been funded by means of £4.5m from the Department of Health and £200k from YAS.

Other expenditure included:

- the purchase of 43 new A&E vehicles at a total cost of £3.8m;
- the installation of solar panels and energy management solutions at headquarters and various ambulance stations;

- Information Communications Technology (ICT) refresh and upgrade including improved IT systems to give better access to technology when front line staff were out dealing with patients to help inform decision making; and
- the roll out of the new carry chair, which should help to reduce the number of staff injuries.

RB stated that the Trust's environmental and sustainability developments had won a number of awards and had featured heavily in the trade press. These awards included:

- Winner of Fleet News - Green Van Fleet Award 2013; and
- Energy Saving Trust - Fleet Heroes Award for Innovation in Car & Van Manufacturing 2013.

The new vehicles were showing a demonstrable 17%-20% fuel saving with other Trusts placing orders as a result of YAS leading the way in these developments.

RB stated that the NHS Sustainable Development Unit carbon strategy set a target of 10% reduction between 2007 and 2015 and mandated that every NHS Trust must have a carbon reduction strategy in place.

The Carbon Footprint of the Yorkshire Ambulance Service for 2007 (YAS' baseline year) was calculated to be 16,531 tonnes of CO₂.

RB further stated that transport contributed two-thirds of the Trust's CO₂ emissions. Through the carbon management plan, YAS had identified a potential to reduce the carbon emissions of its fleet by at least 3,256 tonnes or 30%. In addition, all new drivers into the Trust were trained in eco driving skills as part of their training process.

RB added that many of the measures identified to reduce CO₂ emissions would deliver ongoing financial savings from reduced costs associated with utilities, transport and waste.

RB stated that a Building Management System had been installed at YAS' main call centres and HQ Springhill 1 and Springhill 2 at the beginning of 2013. The system allowed temperatures of boiler and air conditioning systems to be controlled remotely, which had dramatically cut the amount of gas and electric used to both heat and cool the buildings.

Other environmental improvements included:

- installation of double glazing at three stations;
- replacement of several boilers at stations around the region; and
- installation of lighting sensors in the new HART building, which also had a lot of natural lighting.

RB stated that there had been an 8% decrease overall in energy use in comparison to the baseline year data. However, although Fleet costs were reducing, this was partially offset by increased demand.

RB presented an update about the activities of the Yorkshire Ambulance Service Charitable Fund, which received donations and legacies from grateful patients and their families, members of the public and fundraising initiatives throughout Yorkshire.

He stated that, during 2013/14, £33,372 income had been received from donations and legacies and there had been £46,724 of expenditure. The Fund balance as of 31 March 2014 was £102,384.

RB further stated that YAS was currently rolling out a community access defibrillator project in villages and towns across Craven.

One hundred communities across Yorkshire, identified as having a large number of cardiac arrests and patients who would benefit from early life-saving interventions, were to receive a £2,000 defibrillator and a 24-hour access cabinet as part of YAS' Community Public Access Defibrillator 100 Project.

In addition, five public access defibrillators had been match-funded with the British Heart Foundation.

RB stated that the Trust was proud of the purchase and subsequent use of its first Community Medical Unit (CMU) at a cost of £28,860. The purchase of the CMU was the most significant project to date to be supported by the YAS Charitable Fund.

The vehicle had initially been used to provide a static ambulance facility in busy town and city centres on Friday and Saturday evenings and other key dates including bank holidays.

Staffed by an Emergency Care Practitioner (ECP) and Emergency Care Assistant (ECA), the mobile unit, which was equipped to the same level as an ambulance, had been developed to incorporate a clinical assessment/treatment area and waiting area for patients.

Its aim was to provide on-scene medical treatment for patients with minor injuries and illnesses to free up ambulances to deal with more seriously ill patients and relieve pressure on busy hospital emergency departments.

RB confirmed that, between 1 April 2013 and 31 March 2014, a total of 765 patients were seen at the Leeds location, saving an estimated 351 ambulances, which were made available for patients with more serious illnesses and injuries. The CMU had also been used to provide support at large-scale events in the region including the summer's Tour de France cycle race which started in Yorkshire during July.

		Action
	The Deputy Chairman thanked DW and RB for their presentations.	
6	<p>Questions from Members of the Public</p> <p>The Deputy Chairman invited questions from those present, asking people to identify themselves by name, geographical area and organisation if appropriate.</p> <p>Hazel Chatwin (HC), from Healthwatch, North Yorkshire stated that, when telephoning YAS' emergency services , people who were hearing impaired would find it very useful if they could deal with an operator who was familiar with 'Type Talk' machines, which showed conversations on a screen, when it was not practical to use a regular telephone.</p> <p>The Deputy Chairman thanked HC for her input, stating that she would pass her comments onto the Trust's Head of Stakeholder Engagement, Hester Rowell, whom she knew was currently involved in further developing the services offered by the Trust for its patients who were hard of hearing.</p> <p>As there were no further questions, the Deputy Chairman thanked those present for the interest they had shown in YAS' work and commended to everyone YAS' Annual Report for 2013/14, which could be found online at: http://www.yas.nhs.uk .</p> <p>The Deputy Chairman thanked YAS colleagues for their hard work and support both during and in the preparation for the meeting.</p> <p>The Deputy Chairman stated that Members of the Public were very welcome to stay for lunch, during which they might want to visit the several information stalls exhibiting YAS' work and following which they could observe the business of the Trust Board Meeting in Public. If anyone had any questions that they would like to raise outside the meeting environment, they could discuss them with the relevant Director during the lunch break.</p> <p>The Deputy Chairman further stated that Members of the Public should feel free to leave early if they wished, as they had not committed to stay for the whole event. She reminded those present that, once the formal Board meeting started, they would be unable to play an active part unless they were invited to pass comment.</p> <p>The Annual General Meeting closed at 1215 hours.</p>	

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

_____ **CHAIRMAN**

_____ **DATE**