



**EMRTS Delivery and Assurance Group
Action Notes of the Meeting Held on
20th March 2024
Via Microsoft Teams**

Present	Organisation
Stephen Harry	EASC Chief Ambulance Services Commissioner (Chair)
Matthew Edwards	EASC Head of Commissioning and Performance
Lee Leyshon	EASC Assistant Director of Communications & Engagement
David Lockey	EMRTS National Director
Mark Winter	EMRTS Operations Director
Matthew Cann	EMRTS Programme Manager
Meryl Jenkins	ACCTS Service Manager
Mike Slattery	ACCTS Clinical Lead
Geraint Farr (in part)	BCUHB Associate Director of Unscheduled Care
Chris Moss	PtHB Planning
Geraint Norman	SBUHB Head of Financial Planning
Anjula Mehta	SBUHB
Deborah Kingsley	WAST Deputy Director of Corporate Services
Leigh Davies	Welsh Government

	Agenda Item	Action
PART 1-PRELIMINARY MATTERS		
	<p>Welcome and Introductions SH welcomed members to the meeting.</p>	
	<p>Apologies The following apologies were noted: David Rawlinson Hayley Blyth Steve Bonser Stephen Powell Sue Barnes Daniel Warm</p>	
	<p>Minutes of the last meeting The minutes were agreed as an accurate record.</p>	
	<p>Action Log</p> <p>06/23-2 Capital Allocation It was noted that there were ongoing discussions with WG regarding the capital allocation for the service. A Capital Prioritisation Form has been completed and submitted to WG for approval.</p> <p>06/23-3 Effectiveness Survey SH advised that this is an annual request which would be made to members and encouraged members to respond.</p> <p>09/23-4 Helicopter Landing Sites- BCU</p>	

	<p>EMRTS have met with BCU Colleagues. No change at Wrexham and ongoing discussion with YG and YGC</p> <p>09/23-5 Trauma Desk Position No funding approved. 24/7 support discussed at Major Trauma Gateway Review. WAST are forming a Task and Finish Group. Chair agreed to review action in 6 months.</p> <p>11/23-2 ACCTS Evaluation Report Report to be shared at DAG when complete.</p> <p>11/23-3 Financial Position Discussion ongoing with JCC and EMRTS</p> <p>11/23-7 Online version of CAREMORE Update to be brought to next meeting.</p>	
	<p>Matters Arising Not on the Agenda There was nothing raised for discussion.</p>	
<p>PART 2- AGENDA ITEMS FOR DISCUSSION</p>		
	<p>EMRTS Operational Update DL updated members on the EMRTS /ACCTS service and noted that there were no operational issues currently and thanked the Charity for its smooth transition to a new aviation provider.</p> <p>It was noted that the Service Review recommendations provided an opportunity to improve care and decrease the inequality of operational hours for North Wales and underutilisation. EMRTS will await the decision from EASC and is looking forward to planning its future.</p> <p>The ACCTS service continues to work well and exceed it's predicted demand. Concerns were raised regarding the fragile position in North Wales particularly overnight and ACCTS has recently expanded a twilight service into West Wales.</p> <p>Chair Overview SH thanked DL for the update and highlighted the investment and work the Charity had put into the Aviation transition.</p>	
	<p>Finance Update GN presented an update paper to the meeting and it was noted that there was approximately £200K deficit for 23/24 however, EASC have provided non recurrent funding to cover the deficit.</p> <p>Regarding 24/25, it was noted that there was £500K deficit in the budget which was attributed to cost pressures, additional activity around non pay and a £400k deficit for the x4 Cardiff CCP's.</p> <p>Work is ongoing to develop a Cost Improvement Plan for 24/25 with a target of £160k has been set. A formal forecast will be developed at the end of Q1.</p> <p>Regarding Capital, the current allocation for 23/24 of £717k has been spent. For 24/25 a Capital Prioritisation bid has been submitted. It was noted, if successful, the Capital allocation will create some revenue savings c.£50k.</p>	

	<p>Chair Overview SH agreed that ongoing certainty around the Capital allocation would be beneficial to the Service. It was confirmed that the additional revenue provided by EASC did not impact Health Board financial positions.</p> <p>For 24/25 the EASC IMTP has been approved and confirmed the 3.67% uplift is applicable to EMRTS/ACCTS.</p> <p>Both EMRTS and EASC will work collaboratively to balance the cost pressures versus cost reduction programmes and how they are delivered. Regarding pay pressures it was confirmed the allocation process considers inflationary pay.</p>	
	<p>ACCTS Update MS gave apologies for the delay in submitting the ACCTS Evaluation Report. The report is in its final stages however service change has caused delays.</p> <p>Workforce Medical: Issues highlighted in North Wales with only 1 WTE fellow. Further recruitment is in progress to back fill vacancies. The pay rate has been enhanced to mirror rates in BCU and SBU and this has increased coverage and the rota is currently staffed. South Wales position is robust but under some pressure due to supporting North provision.</p> <p>Operational Model: MS discussed the Twilight model to support SBU/West Wales on Mondays and Tuesdays. The twilight service is in demand and proving a valuable resource and has good feedback.</p> <p>Education and Development A number of training events are running and ACCTS have met with Bangor University to progress the MSc in Retrieval and Transfer medicine. There have been requests from Health Boards to extend transfer training into next FY and ACCTS are keen to support.</p> <p>Chair Overview SH thanked MS for the update and the work ongoing to support operational delivery for the service. SH is attending a Critical Care Leadership Board meeting and will highlight the current training issues.</p> <p>SH updated members that discussions are ongoing with BCU Medical Director and Chief Exec to organise a workshop to agree a way forward for ACCTS in North Wales.</p>	
	<p>Helicopter Landing Sites MW noted that North Wales issues have already been discussed.</p> <p>An update has been received regarding the Grange Hospital and plans are in place to complete the building work by the end of the calendar year. EMRTS will continue to use the secondary landing site until completion.</p>	

	<p>In relation to the Derriford Report, it was noted that Ray Selby from Shared Services Estates was leading on this from an All-Wales perspective and EMRTS will await the recommendations.</p> <p>Chair Overview SH thanked MW for the update and highlighted the importance of keeping these items on the agenda.</p>	
	<p>Risk Register MC gave an overview of the Risk register. 20 risks in total, 3 low, 8 moderate and 9 Significant. Majority of risks are a ‘Watching Brief’ some risk highlighted:</p> <p>3064 ACCTS Vehicles - Vehicle provision is delicate and the expansion of ACCTS into West Wales means all 3 bespoke ambulance will be in use. Capital Prioritisation bid includes costs for three additional new vehicles.</p> <p>Risks added since last DAG:</p> <p>3621 Capital Finance – A risk that a leak of Capital may affect service operation and delivery. Score 9</p> <p>3631 Access to base equipment during inclement weather – A risk that in the event of inclement weather, access to an EMRTS base is restricted and specialist equipment may not be available. Score 6</p> <p>3632 ACCTS North Portakabin – A risk that removal of financial support from BCU will result in removal of the ACCTS portakabin from Bangor. Score 15</p> <p>3633 ACCTS North Staffing – A risk that removal of clinical support from BCU will affects ACCTS Clinical provision and service delivery. Score 15</p> <p>Chair Overview: SH thanked MC and agreed the Risk Register is an accurate reflection of current risk in the service.</p> <p>ME highlighted future potential risks as a result of the EMRTS Service Review.</p>	
	<p>EMRTS Commissioning Intentions MC presented the EMRTS Qtr3 Commissioning Intentions and gave an overview of the update.</p> <p>Chair Overview SH thanked MC for the update. No further comments were noted.</p>	
	<p>EASC Update</p> <p>Commissioning Intentions ME gave an update on EMRTS 24/25 Commissioning Intentions. Members noted:</p>	

	<p>The update provided by MC against the Qtr 3 Update against Comm'g Intentions for 2023-24 and that many elements of the intentions are awaiting the outcome of the EMRTS Service Review.</p> <p>Members' comments on the draft Commissioning Intentions for 2024-25.</p> <p>That elements of the intentions would again await the outcome of the EMRTS Service Review, particularly Service Expansion and System Transformation.</p> <p>The progress made by the ACCTS service and that the intentions reflects the shift from service development and implementation to a phase of service delivery, working with stakeholders to review and strengthen the service model and to build on the ACCTS Service Evaluation.</p> <p>Members endorsed the Commissioning Intentions for 2024-25.</p> <p>Chair Overview: SH thanked ME for the update and confirmed the 24/25 Commissioning Intentions were approved at the EASC Meeting the day before and EASC IMTP.</p> <p>EMRTS Service Review. Members noted:</p> <p>The options appraisal workshop undertaken in January with health board representation from a wide range of disciplines:</p> <ul style="list-style-type: none">The information provided to health board members in advance of the workshop.The use of the evaluation framework agreed as part of phases 1 and 2 of the engagement process.Scoring and ranking of the six shortlisted options – with options 3 and 4 as the highest ranked options.The attendance of EMRTS and Charity representatives in order to answer technical questions. <p>That Phase 3 of the engagement process took place throughout February and asked for views on the six shortlisted options.</p> <p>Feedback themes in Phase 3 were very similar to the feedback received throughout the engagement process, these included:</p> <ul style="list-style-type: none">Dissatisfaction and opposition to the closure of bases in Caernarfon and Welshpool.Support for maintaining current bases and providing additional RRVs as an alternative to closure.	
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	<p>Concern about longer response times and the perception that the response to rural areas will be impacted.</p> <p>Concern about the impact of handover delays. Concerns that remote communities are more vulnerable and need something more bespoke to reflect their rural needs.</p> <p>Concern that EMRTS is too specialised.</p> <p>Concern about paramedic staffing levels in mid and rural north Wales.</p> <p>Concerns about EMRTS staff retention with any base moves.</p> <p>Concerns that the Charity will lose goodwill and the risk to charitable donations.</p> <p>Concern that rural communities have ‘lost all other services already’.</p> <p>Current bases perceived as a ‘local lifeline’ and visual presence is reassuring.</p> <p>The themes have informed the Final Report (and recommendations, particularly Recommendation 4) that was considered by EASC at its meeting on 19 March 2024.</p> <p>The four recommendations within the Report asked Committee Members to:</p> <ul style="list-style-type: none"> Approve the consolidation of the EMRTS Services currently operating at Welshpool and Caernarfon bases into a single site in North Wales. Requests that the Charity secures an appropriately located operational base in line with the findings of this Report. Require that a joint plan is developed by EMRTS and the Charity, that maintains service provision across Wales during the transition to a new base and that this plan is included within the Committee’s commissioning arrangements. Approves the development of a commissioning proposal for bespoke road-based enhanced and/or critical care services in rural and remote areas. <p>Lots of discussion at the Committee meeting on 19 March this included:</p> <ul style="list-style-type: none"> The clinical case was accepted. The process and ensuring due consideration of the information available. 	
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	<p>The risk to the Charity regarding a further delay to the decision-making process and that the Charity could choose to set up their own service.</p> <p>Boards were asked to consider approving the Final Report ahead of an extraordinary meeting on 28 March with a view to a decision being made.</p> <p>Members noted the update.</p> <p>Chair Overview: SH thanked ME for the update and highlighted the importance of the service EMRTS provides. EASC will continue to reassure stakeholders that the service will still be provided to rural areas. The Service Review process has been thorough and comprehensive and all comments and opinion have been considered. The Wales Air Ambulance Charity is under significant pressure for a decision to be taken. There are 4 recommendations to be considered and further information has been asked for Option 4. SH continues to meet with Health Boards and provide briefings.</p>	
	<p>WAA Update No representative from the Charity</p> <p>Chair Overview: SH gave the opportunity to provide a written update if the Charity wish and highlighted the Charities concerns on the importance of making a prompt decision on the EMRTS Service review.</p>	
PART 3 OTHER MATTERS		
	<p>Any Other Business There was no other business raised at the meeting</p>	
	<p>Date of Next Meeting Tuesday 4th June 2024 13:00</p>	