



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Meeting Date	26th July 2018			Agenda Item: 5i.
Report Title	Committee Chairs' Report			
Report Author	Liz Stauber, Committee Services Manager			
Report Sponsor	Pam Wenger, Director of Corporate Governance			
Freedom of Information	Open			
Purpose of the Report	The purpose of the report is to outline discussions undertaken by board committees and other groups reporting to the board.			
Key Issues	This report focuses on all the board's corporate objectives but specifically relates to embedding effective governance and partnerships.			
Specific Action Required (please ✓ one only)	Information	Discussion	Assurance	Approval
			✓	
Recommendations	The board is asked to note the report.			

COMMITTEE CHAIRS' REPORT

1. INTRODUCTION

The purpose of the report is to provide an update on matters considered by the board's committees. The board is asked to note a number of summary reports from the chairs of the sub-committees and where appropriate, ratify any approvals made.

2. BACKGROUND

The board will be aware that a number of committees have been established under the health board's standing orders and each committee will present reports to the board during the course of the year outlining key discussions, issues and risks discussed during meetings.

3. REPORTS FROM COMMITTEE CHAIRS

(i) Charitable Funds Committee (appendix 1)

The board is asked to **receive** and **note** the chair's summary of the meeting held on 26th June 2018.

(ii) Workforce and Organisational Development Committee (appendix 2)

The board is asked to **receive** and **note** the chair's summary of the meeting held on 5th July 2018.

(iii) Emergency Ambulance Services Committee (EASC) (appendix 3)

The board is asked to **receive** and **note** the minutes of the meetings held on 15th May 2018.

4. GOVERNANCE AND RISK ISSUES

Any governance risks and issues are managed via the committee meetings and exception reports will be provided to the board by the respective chairs.

5. FINANCIAL IMPLICATIONS

There are no financial implications for the board to consider/approve.

6. RECOMMENDATION

Members of the board are asked to:

- **NOTE** the content of the reports.

Governance and Assurance					
Link to corporate objectives (please ✓)	Promoting and enabling healthier communities	Delivering excellent patient outcomes, experience and access	Demonstrating value and sustainability	Securing a fully engaged skilled workforce	Embedding effective governance and partnerships
					✓
Quality, Safety and Patient Experience					
Ensuring the board carries out its business appropriately through its sub-committees and aligned with its standing orders is a key factor in the quality, safety and experience of patients receiving care.					
Financial Implications					
No financial implications for the board to be aware of.					
Legal Implications (including equality and diversity assessment)					
It is essential that the board complies with its standing orders, which includes receiving updates from its sub-committees.					
Staffing Implications					
No staffing implications for the board to be aware of.					
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)					
The report outlines work undertaken by committees and joint committees to review the short term performance and finance position of the health board as well as focussing on the longer term sustainability. The governance structure aims to identify issues early to prevent escalations and the committees integrate into the overall board arrangements. In addition, the health board works collaboratively with partners as part the joint committees.					
Report History	This report is a standing item on the board's agenda.				
Appendices	<ul style="list-style-type: none"> Chair's summary – Charitable Funds Committee (appendix 1) Chair's summary - Workforce and Organisational Development Committee (appendix 2) WHSSC minutes (appendix xxx) EASC minutes (appendix xxxx) 				



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Agenda Item	
Freedom of Information Status	
Open	
Reporting Committee	Charitable Funds Committee
Author	Liz Stauber, Committee Services Manager
Chaired by	Martyn Waygood, Non-Officer Member
Lead Executive Director (s)	Lynne Hamilton, Director of Finance
Date of last meeting	26 June 2018
Summary of key matters considered by the committee and any related decisions made.	
<p>Proposal to develop a marketing strategy for charitable funds</p> <p>Members considered the proposal to seek external support to develop a marketing strategy for charitable funds but agreed a more appropriate way forward would be to recruit a fundraising manager to start to progress the health board's charity. Discussions were also undertaken as to the feasibility of integrating the Golau Cancer Foundation under the 'umbrella' of the main charity. The proposals were to be discussed further with the Director of Workforce and Organisational Development (OD) to determine next steps.</p>	
Key risks and issues/matters of concern of which the board needs to be made aware:	
<p>Golau Cancer Foundation</p> <p>The discussion focussed on the work to progress the rebranding of the foundation, including the new website. Members raised concern that some of the fundamental issues were not being addressed, particularly in reference to the recent internal audit, and it was agreed that the chairs of the Charitable Funds and Audit committees would meet with the service director for the Singleton Services Delivery Unit to progress these.</p>	
Delegated action by the committee:	
<p>The committee received four bids for funding:</p> <ul style="list-style-type: none"> Integrated diabetes model – approved; 'Big Conversation' for service improvement – declined; Third sector strategic project framework manager – declined; Crisis resolution team – the original decision of the bids panel upheld with no further funds approved. <p>Members also approved:</p> <ul style="list-style-type: none"> The establishment of a new pulmonary rehabilitation charitable fund; The charitable funds investment policy; The charitable funds expenditure strategy and reserves policy. The Charitable Funds Committee annual report; 	
Main sources of information received:	
<ul style="list-style-type: none"> Expenditure for the period was £316k against an income of £165k and fund balances had reduced to below £6m; Income was received into 27% of the delegated funds during the period with expenditure being incurred from 29%; 	

- The value of the portfolio had decreased to £6.2m following the release of £500k unrealised gains to support the Charitable Funds Committee general purpose fund;
- The balance on the Charitable Funds Committee fund as at 31st May 2018 was £332,514. Commitments against the fund for 2018/19 currently totalled £309,429;
- An update on the work to reduce dormant funds;
- The charitable funds cash projection;
- Details of funds closed since the previous meeting; and
- The committee's work plan for 2018-19.

Highlights from sub-groups reporting into this committee:

A report was received from the bids panel and it was agreed that the committee chair would write to panel members with regard to attendance and to seek clinical nominations.

Matters referred to other committees

None identified.

Date of next meeting

09 October 2018



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Agenda Item	
Freedom of Information Status	Open
Reporting Committee	Workforce and Organisational Development (OD) Committee
Author	Liz Stauber, Committee Services Manager
Chaired by	Ceri Phillips, Non-Officer Member
Lead Executive Director (s)	Hazel Robinson, Director of Workforce and OD
Date of last meeting	05 July 2018
Summary of key matters considered by the committee and any related decisions made.	
<p>Workforce Risks</p> <p>Members received a reflection from the Director of Workforce and OD as to her observations during her first three months within the organisation. Capacity of workforce functions had been reviewed and compared with other health boards, with the analysis demonstrating that ABMU was 'light' on resources and the insufficient capacity was impacting on the way in which workforce could support the organisation.</p> <p>Members discussed the need to increase the workforce resources in order to provide sufficient support to the units to complete basis people management tasks, such as sickness absence, personal appraisal and development reviews, performance management and statutory and mandatory training. The need to develop a robust organisational development programme was also agreed.</p> <p>It was noted that the health board had an unprecedented number of casework with around 180 cases in total, including disciplinary, grievance and dignity at work, and the committee asked that this be given immediate attention to develop a plan to close enough cases to bring the health board in-line with others, for which the average was around 80.</p> <p>The committee agreed that the report needed to be developed further following the discussion and the issues relayed to the Chairman and Chief Executive. In an addition, the senior team was to reflect on the feedback and develop an action plan to share with the chair of the committee to determine the course of action for both short and long term improvements.</p>	
Key risks and issues/matters of concern of which the board needs to be made aware:	
There are no key risks, issues or matters of concern to bring to the board's attention.	
Delegated action by the committee:	
<p>Workforce and OD Committee annual report 2017-18 - the committee approved its terms of reference, subject to the changes discussed. It was agreed that the meeting frequency become monthly, alternating between a formal agenda and a discussion forum. The membership was also to be extended to include the senior workforce team and unit representatives.</p>	

Main sources of information received:	
No other sources of information to highlight.	
Highlights from sub-groups reporting into this committee:	
None received.	
Matters referred to other committees	
No matters were referred to other committees.	
Date of next meeting	To be confirmed



**EMERGENCY AMBULANCE SERVICES
JOINT COMMITTEE MEETING**

**'UNCONFIRMED' MINUTES OF THE MEETING HELD ON
15 MAY 2018 AT THE HEALTH AND CARE RESEARCH WALES
CASTLEBRIDGE 4, CARDIFF**

PRESENT

Members:

Mrs Allison Williams (Vice Chair)	Chief Executive, Cwm Taf UHB
Mr Stephen Harrhy	Chief Ambulance Services Commissioner
Mr Len Richards	Chief Executive, Cardiff & Vale UHB
Mrs Tracy Myhill	Chief Executive, Abertawe Bro Morgannwg UHB
Mr Steve Moore	Chief Executive, Hywel Dda UHB
Mrs Judith Paget	Chief Operating Officer, Aneurin Bevan UHB
Ms Patsy Roseblade	'Interim' Chief Executive, WAST
Mrs Carol Shillabeer	Chief Executive, Powys tLHB
Dr Evan Moore	Deputy Chief Executive, Executive Medical Director, Betsi Cadwaladr UHB

In Attendance:

Mr Julian Baker	Director, National Collaborative Commissioning Unit
Mrs Claire Bevan	Executive Director of Quality, Safety & Patient Experience, WAST (in Part)
Mr Stuart Davies	Director of Finance, EASC & WHSSC
Mr Shane Mills	National Collaborative Commissioning Unit
Mr Robert Williams	Committee Secretary / Board Secretary, Host Body
Mr Ross Whitehead	Assistant Chief Ambulance Services Commissioner

Part 1. PRELIMINARY MATTERS		
EASC 18/38	<p>CLOSED 'IN COMMITTEE' MEETING</p> <p>In accordance with the provision of Section 1(2) of the Public Bodies (Admissions to Meetings) Act 1960, the Committee met in closed session, where it was resolved that representatives of the press and other members of the public be excluded from that part of the meeting on the grounds that it would be prejudicial to the public interest, due to the confidential nature of the business transacted. This section of the meeting was held in private session.</p>	Committee Secretary
EASC 18/39	<p>WELCOME AND INTRODUCTIONS</p> <p>Mrs A Williams (Vice Chair) welcomed Members to the meeting of the Emergency Ambulance Services Committee and those present introduced themselves.</p> <p>Mrs A Williams explained that a process was underway to appoint a new Independent Chair, following the end of Professor McClelland's term. Mrs A Williams also explained that she had exceeded her term as Vice Chair, which would also require review.</p> <p>Members RESOLVED to AGREE that Mrs A Williams continue in her Vice Chair capacity and Chair the meeting and that the role of Vice Chair be reviewed following the appointment of a Chair.</p>	Committee Secretary
EASC 18/40	<p>APOLOGIES FOR ABSENCE</p> <p>Apologies for absence were received from Dr Tracey Cooper, Public Health Wales, Mr Gary Doherty, Betsi Cadwaladr UHB and Mr Steve Ham, Velindre NHS Trust.</p>	
EASC 18/41	<p>DECLARATIONS OF INTERESTS</p> <p>There were no additional interests, to those already declared.</p>	
EASC 18/42	<p>MINUTES OF THE MEETING HELD ON 27 MARCH 2018</p>	

	Members CONFIRMED the minutes of the meeting held on 27 March 2018, subject to some minor spelling corrections.	Committee Secretary
EASC 18/43	<p>ACTION LOG</p> <p>Members received the action log and NOTED that progress with some of the related matters would be considered within the substantive business meeting agenda.</p> <p>The Committee RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Action Log and the updates provided. 	
EASC 18/44	<p>MATTERS ARISING</p> <p>There were no Matters Arising that were not already contained within the Action Log.</p>	
Part 2. KEY ITEMS FOR DISCUSSION		
EASC 18/45	<p>CHAIR'S REPORT</p> <p>Members received a verbal report from the Vice Chair.</p> <p>Mrs A Williams confirmed that the Public Appointments process to appoint an Independent Chair had recently closed, with interviews, subject to interest and short listing, scheduled for June 2018. A further update would be provided at the next meeting of the Committee.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Vice Chair's update. 	<i>CASC / Vice Chair</i>
EASC 18/46	<p>CHIEF AMBULANCE SERVICES COMMISSIONER'S REPORT</p> <p>Mr S Harrhy, Chief Ambulance Services Commissioner (CASC), presented an update on matters contained within his written report, which included:</p> <ul style="list-style-type: none"> • Clinical Risk Review 	<i>NCCU</i>

	<p>Mr S Harrhy provided an update on the work progressed to date and confirmed that a more detailed report on the outcome of this work will be presented to the September 2018 meeting (added to forward look).</p> <ul style="list-style-type: none"> • Non Emergency Patient Transport Services <p>Mr S Harrhy provided an update on the work progressed to date to develop the NEPTS commissioning framework and confirmed that an update including the Framework development, will be presented to the September meeting of the Committee.</p> <ul style="list-style-type: none"> • Evaluation of the Collaborative Commissioning Methodology <p>Mr S Harrhy provided an update on the work progressed to date and confirmed that that the recent findings from the independent evaluation, were recently published in an academic journal for rigorous peer review and would soon also be presented in the Journal of Integrated Care.</p> <ul style="list-style-type: none"> • Strategic Outline Plan for Vehicle Replacement <p>Mr S Harrhy provided an update on the work progressed to date and NOTED that the Commissioner, on behalf of Members, had reviewed the Plan against the requirement of the National Collaborative Commissioning Framework and provided Commissioner support.</p> <ul style="list-style-type: none"> • Review of sub group Terms of Reference and attendance <p>Members welcomed the reported improvements in Health Board and Trust representation and attendance at EASC Sub Group meetings. Members also AGREED to review the working of the Sub Groups at the end of the current financial year. (added to forward look).</p> <p>Members RESOLVED to</p> <ul style="list-style-type: none"> • NOTE the report. 	<p>Clinical Director</p> <p>NCCU Director</p>
--	--	--

EASC 18/47	<p>PROVIDER ISSUES BY EXCEPTION</p> <p>Members NOTED that the report relating to Welsh Ambulance Services Trust (WAST) reported Serious Untoward Incidents (SUIs), had been considered earlier, in the 'Closed' section of the meeting, as a number of related Root Cause Analysis (RCA) investigations had either not commenced or been completed and in some cases, it was considered that there was a risk of being able to identify individual patients.</p> <p>Members AGREED that related matters needed to be progressed with Health Boards and investigations concluded, ensuring the focus remained on learning across the system and, where appropriate from an EASC perspective, informing the commissioning framework.</p> <p>Members RESOLVED to</p> <ul style="list-style-type: none"> • NOTE the update and the related approach taken. 	
EASC 18/48	<p>AMBULANCE QUALITY INDICATORS</p> <p>Mr R Whitehead presented the report which provided Members with an overview of the most recently published Ambulance Quality Indicators (AQIs), for the period 1 January 2018 – 31 March 2018.</p> <p>Mr R Whitehead reminded Members of the work in progress to better inform the use of AQIs to improve performance, including progress with the graphical design presentational changes to better inform Health Boards and the public of Wales in terms of delivery.</p> <p>Mr R Whitehead informed members of discussions with Statswales and the publication of data relating to the AQIs on their website.</p> <p>Members NOTED and welcomed the update and that the focus of the work was more towards reporting on clinical outcomes than just time.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the overview of the last quarter 	

	<p>Ambulance Quality Indicators;</p> <ul style="list-style-type: none"> • NOTE the progress towards developing more user friendly versions; and • NOTE the progress made towards transitioning towards publishing AQIs on the StatsWales website. 	
EASC 18/49	<p>MONTH 12 FINANCE REPORT</p> <p>Mr S Davies presented an update on the Month 12 EASC Finance position.</p> <p>Members NOTED that there was no significant under or over spends to report and that the reported position was balanced, with a projected year end break even position being reported. Members NOTED also that the Host Body Audit Committee had recently considered the 'draft' Annual Accounts, which include the consolidated WHSSC and EASC Accounts & Financial Statements, which will be considered for approval by the Cwm Taf UHB on 31 May 2018.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Month 12 finance update. 	
Part 3. KEY ITEMS FOR APPROVAL		
EASC 18/50	<p>AMBER Review – Terms of Reference for the Accelerated Review Programme.</p> <p>Mr S Harrhy, Chief Ambulance Services Commissioner, presented the 'draft' Terms of Reference for progressing the arrangements for the accelerated Amber review programme.</p> <p>Members discussed the context and related drivers for undertaking the review of the Amber category and that the PACEC report, considered previously by Committee, had also recommended a review of Amber. Members NOTED that a call category review was undertaken by the WAST Clinical Prioritisation Software Group in 2017/18 and that ongoing review processes were also at the time established and have been in place since.</p> <p>Members NOTED the EASC Integrated Medium Term Plan (2018/19) also commits the CASC to undertake an Amber review.</p>	

	<p>Members in discussion raised a number of concerns regarding the 'draft' Terms of reference, as presented, and sought clarity as to what were the questions that need to be answered, within the scope of the review.</p> <p>Members NOTED that Amber was circa 80% of the total emergency call volume, it was therefore essential that the scope is agreed, along with related timescales to ensure the review is successfully concluded. Mrs Roseblade explained that the Amber Category is already sub categorised and could be sub categorised further if necessary.</p> <p>Mr S M Harrhy explained that in simple terms, although undertaking a review to report the outcome is rather more complex, the question is are there any call types within the Amber Category that should be elsewhere (Red or Green) and of those calls categorised within Amber, what are considered to be reasonable Mean and Median response timescales, accepting that clinical outcomes from response, as opposed time based, are of far more value in reporting terms.</p> <p>Mr R Whitehead explained that the current Amber call volume is around 30,000 calls per month and that whilst there had been some reported issues with delayed response, which may or may not have impacted on the patient's clinical outcome, the comparative numbers of these cases against the 30,000 were small and as such, the vast majority of the category was probably appropriately assigned.</p> <p>Members felt that it was important to understand the highest risk conditions currently categorised in Amber and to what extent may a different category of response be more appropriate or can positively influence clinical outcomes.</p> <p>Members also discussed whether a 'time' based response, for some categories of call, would be more appropriate. It was also considered important to understand the impact of last winter and any specific factors which may need to be considered in isolation. Members also raised and discussed the option for considering, at some future point in time, a different type of response, including community based. However, Members recognised and AGREED that the review must focus on Emergency Ambulance response.</p>	
--	---	--

	<p>Members considered that the comments raised via the Stroke association, also need to be taken into consideration.</p> <p>Members AGREED that the 'draft' Terms of Reference required significant amendment in advance of proceeding with commissioning the review and the current scope narrowed.</p> <p>Mrs A Williams suggested that an amended 'Draft' Terms of Reference can be considered further, later in the week, via the All Wales Chief Executives meeting.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the developing 'draft' Terms of Reference for the Amber Review and related comments; and • AGREE that an amended 'draft' strengthened in the areas discussed, is progressed via Mrs A Williams and engagement with All Wales Chief Executives. 	<p>CASC</p> <p><i>Vice Chair / NHS CEOs</i></p>
EASC 18/51	<p>OPPORTUNITIES FOR JOINT INITIATIVES BASED ON IMTPs AND KEY SCHEMES</p> <p>Mr J Baker, Director, National Collaborative Commissioning Unit (NCCU), presented an update to Members, summarising the related work progressed since the March 2018 meeting.</p> <p>Mr J Baker made reference to the March 2018, Cabinet Secretary correspondence and the work undertaken with WAST and Health Boards to develop proposals for short, medium and long term impact for pre hospital unscheduled care that could be considered appropriate for roll out across Wales.</p> <p>Mr J Baker outlined the process that had been adopted in order to progress the requirements of the correspondence. Members NOTED that the initial summary of submitted responses resulted in</p> <ul style="list-style-type: none"> • 140 Joint WAST and Health Board service change initiatives in support of performance improvements for EMS; and • 40 Health Board specific (5 of 7 Health Boards) service change initiatives from home to emergency departments 	

	<p>Members NOTED that reference was also made to the actions taken within WAST and Health Boards on the additional £10m winter monies announced in January 2018, which had been reported and considered at the March Joint Committee meeting.</p> <p>Mr J Baker updated Members on the actions progressed since the March meeting of the Committee, which includes a summary table of bids, with more detail sitting beneath the table if required to review.</p> <p>A report on related matters was shared with Chief Executives via email on 11 April 2018 and submitted to the All Wales Directors of Planning meeting. The report outlined a suggested way forward, which included engagement with 1,000 Lives+, the C3 Faculty and the NCCU on behalf of EASC to develop a related work plan which would include a series of local workshops, development of a repository, piloting framework, small value service change proposals including summary evaluation and an approach in considering whether the commissioned service change has delivered their intended outcomes / benefits realisation. At the All Wales Directors of Planning meeting, it was suggested and Agreed that the EASC Planning, Development & Evaluation PDEG Sub Group would be used to disseminate change initiatives previously compiled and evaluated.</p> <p>Members discussed the progress with related work and emphasised the need to balance process (including evaluation) with pace of action needed to inform agreed development for commissioning by this coming winter.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the reported progress; and • ENDORSE the actions proposed to develop related work further. 	<p><i>NCCU Director</i></p>
EASC 18/52	<p>EMRTS – EVALUATION OF EXTENSION OF OPERATIONAL HOURS AND THE IMPACT ON PATIENT CLINICAL OUTCOMES</p>	

	<p>Mr S Harrhy, Chief Ambulance Services Commissioner, presented a report, which outlined the proposed approach to addressing the evaluation of considering an extension to the operational flying hours of EMRTS and its related impact on patient clinical outcomes.</p> <p>Mr S Harrhy presented a proposed Twin Track approach, one relating to the already commissioned conclusion of the Swansea University 3 year evaluation, which was scheduled to conclude in early 2019. In addition, there was a proposal to undertake a series of workshop related activities across Stakeholders, informed by data analysis output from the Swansea University work.</p> <p>In discussing the proposed approach, Members expressed a number of related concerns. The current Swansea evaluation and its related reporting timeline, was not linked with the more recent request agreed through EASC and linked with the establishment of the Major Trauma Centre for Mid and South Wales.</p> <p>Members considered that it was important that the two matters were kept separate and the latter review of flying hours needed to be concluded in advance of the broader 3 year evaluation, in order to inform the implementation work that will need to be progressed in relation to the Major Trauma Centre / Trauma Networks.</p> <p>Mrs A Williams asked that a revised approach be explored and an update presented for consideration at the next meeting of the Committee.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the update provided and that matters are revisited in light of the comments made by Members. 	CASC
EASC 18/53	<p>WALES AUDIT OFFICE REVIEW OF EMERGENCY AMBULANCE SERVICES COMMISSIONING – UPDATE AND CLOSURE REPORT</p> <p>Mr S M Harrhy, Chief Ambulance Services Commissioner presented an update on progress and proposed closure report to Committee. Mr S M Harrhy outlined the intended arrangements for those few matters that remained outstanding and where the monitoring and review of completed action is</p>	

	<p>considered.</p> <p>Of the 12 recommendations made, 10 had been completed, 1 was for consideration (Memorandum of Understanding between Welsh Government, EASC and WAST), included as Appendix 2 and 1 relating to better capturing patient experience remained outstanding.</p> <p>Members endorsed the MoU and agreed the proposed direction of travel to address the Patient Experience action.</p> <p>Members NOTED that the CASC would ensure Wales Audit Office were kept updated on progress.</p> <p>Members RESOLVED to;</p> <ul style="list-style-type: none"> • NOTE the report; • ENDORSE the MoU for submission to WG; and • APPROVE the final actions are where identified, incorporated into the EASC Sub Group(s). 	<p><i>CASC/ Committee Secretary</i></p>
EASC 18/54	<p>JOINT COMMITTEE RISK REGISTER</p> <p>Mr Robert Williams, Committee Secretary (Board Secretary Host Body) presented the report and updated Members on the development of the Risk Register and related changes.</p> <p>Members NOTED that there had been very little change to the register in terms of risks and ratings, to what was reported in the March 2018 Committee meeting. However, reference was made to the EMRTS flying time review being commissioned in the context of the Major Trauma Centre consultation outcome. Also that the delay in appointing a replacement Independent Chair of the Committee, following Professor McClelland's term ending had been added.</p> <p>Members RESOLVED to;</p> <ul style="list-style-type: none"> • NOTE the report and ENDORSE the updated Risk Register. 	<p><i>CASC/ Committee Secretary</i></p>
Part 4. GOVERNANCE & ASSURANCE		
EASC 18/55	<p>CHAIRS UPDATES FROM EASC SUB GROUPS</p> <p>Members NOTED the updates provided by the Chairs of the sub groups established by the Joint Committee,</p>	

	<p>these being:</p> <ul style="list-style-type: none"> – Emergency Medical Retrieval and Transport Service Delivery Assurance Group (EMRTS DAG) Chair's Summary 19 March 2018 – Non Emergency Patient Transport Services (NEPTS) Commissioning and Delivery Assurance Group (CDAG) Chairs Summary 26 February 2018 – NEPTS Chair's Summary Report from the meeting held on 23 April 2018. – Joint Management Assurance Group (JMAG) Chair's Summary 24 April 2018 – Joint Management Assurance Group (JMAG) Action Notes from the Meeting held on 10 January 2018 <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • RECEIVE, NOTE and ENDORSE the Sub Group summary updates and Minutes received. 	
EASC 18/56	<p>JOINT COMMITTEE FORWARD PLAN</p> <p>Members RECEIVED and NOTED the Forward Plan of Committee business. Mr R Williams confirmed he would amend the Plan, where appropriate, with matters raised at the meeting.</p> <p>Members RESOLVED to:</p> <ul style="list-style-type: none"> • NOTE the Forward Plan. 	
OTHER MATTERS		
EASC 18/57	<p>DATE AND TIME OF NEXT MEETING</p> <p>The time and date of the next Joint Committee meeting was scheduled to commence at 09:30pm (in closed workshop session) on Tuesday 10 July 2018, at Castlebridge 4, Health & Care Research Wales, Cardiff.</p>	<p><i>Committee Secretary</i></p>

Signed (Chair)
Mrs A Williams (Vice Chair)

Date