***UNCONFIRMED (Disclosable)***

**MINUTES OF THE ANNUAL GENERAL MEETING**

**OF THE EAST OF ENGLAND AMBULANCE SERVICE NHS TRUST**

**HELD ON TUESDAY 27 SEPTEMBER 2022 BETWEEN 14:30PM-15:30PM**

**Held via Teams Live**

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| **Present:** | Nicola Scrivings | Trust Chair | TC |
|  | Emma De Carteret | Director of Corporate Affairs and Performance | DoCAP |
|  | Esther Kingsmill | Deputy Head of Corporate Governance | DHCG |
|  | Hein Scheffer | Director of Strategy, Culture and Education | DoSCE |
|  | Jon Moore | Deputy Chief Operating Officer | DCOO |
|  | Kate Vaughton | Director of Integration | DoI |
|  | Kevin Smith | Director of Finance | DoF |
|  | Linda Gove | Head of Corporate Governance | HoCG |
|  | Marika Stephenson | Director of People Services | DoPS |
|  | Melissa Dowdeswell | Director of Nursing | DoN |
|  | Tom Abell | Chief Executive Officer | CEO |

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| **PUBLIC SESSION (Disclosable)** | |
| **1.0** | **WELCOME** |
| 1.1 | Nicola Scrivings, Trust Chair (TC) welcomed those present to the 2021-22 Annual General meeting (AGM) of the East of England Ambulance Service NHS Trust. |
| **2.0** | **MINUTES FROM THE PREVIOUS MEETING** |
| 2.1 | The minutes of the 2020 – 2021 AGM, held on 08.09.2021, were received and approved with no amendments. |
| **3.0** | **TRUST CHAIR UPDATE** |
| 3.1 | The TC reflected on the services provided over the preceding year and extended her thanks to all staff and volunteers who had contributed to delivering an excellent service for patients under extremely challenging circumstances. The events of the year had tested the resilience of the organisation, people, operations, partnerships and patients. She was proud of the dedication, compassion, commitment and passion of staff who were core to the values of delivering exceptional care, outstanding people, ever hour of every day. This could not be achieved without the support of the public, there had been an overwhelming response from local communities offering to assist in a range of ways as well as messages, donations and offering time and support to colleagues. The AGM was supported by the annual report, accounts and quality accounts which provided an overview of the organisation’s activity. The TC extended her thanks to all those who had contributed to the production of these documents. |
| 3.2 | The TC introduced the directors of the East of England Ambulance Service. The Trust Board had been focussed on providing outstanding care to patients and supporting the development of communities through extensive partnership work. Throughout the year the Trust continued to work with regulators through the well led special measures regime to ensure actions were properly embedded so patients could continue to receive the support they required. The fit for the future programme was launched in 2021/22 and was focussed on people development, developing impact, system partnership and culture. The Board had oversight of this programme of work, improvements within this programme would have long ranging impacts for the Trust. |
| 3.3 | The TC thanked Board members for their advice, guidance and leadership which had enabled the Trust to respond to the increasing challenges over the last year. These challenges included huge service demand, significant handover delays and variants of COVID-19. It was vital to ensure the basics were in place to provide a collaborative, co-creative and comprehensive approach to deliver excellent quality and safe care whilst supporting organisation transformation. Work was undertaken to ensure a sustainable service which was open, honest and supportive of all colleagues. |
| 3.4 | The Annual General Meeting heard from a number of staff in the organisation via a pre-recorded video. (Available on the home page of our website) |
| **4.0** | **GOAL ONE: PROVIDE OUTSTANDING QUALITY OF CARE AND PERFORMANCE** |
| 4.1 | The Director of Nursing, Melissa Dowdeswell (DoN), briefed the AGM on the activity underway to support the delivery of goal one. |
| 4.2 | The DoN informed the AGM that patients were at the heart of the organisation’s activity. Standards were set to ensure that the clinical care provided to patients met the standards of care one would expect their own family and friends to receive. Patient and public involvement ensured patients were central to the work of the organisation. A patient and public involvement (PPI) strategy had been co-produced with patients. The community engagement group (CEG) provided a forum for members to share their views on the service to enable the development of the organisation. The PPI strategy had provided the CEG with an opportunity to develop new ways for members to engage with the Trust. This group set an ambitious workplan to maximise the expertise of volunteers and to support the delivery of the strategy. Face to face engagement events provided the opportunity to engage directly with members of the public on services provided. Discovery interviews provided an opportunity for patients to share their experiences in their own words via video. These videos were shared in public board meetings and used for training, handling complaints and serious incidents. They were a powerful tool for hearing the patient voice directly. |
| 4.3 | The policy for complaints and compliments had been refreshed and provided a new complexity grading for the assessment of complaints, concerns and compliments which enabled the Trust to manage expectations in a positive and accurate way. Every complaint or concern was personal to the individual and it was vital to ensure a thorough investigation took place. Compliments always outweighed the level of complaints, in 2021/22 an average of 213 compliments were received each month which were reported to the local management team and emailed to individual staff to acknowledge in their personnel file. Complaints and concerns accounted for less than 1% of contacts and were closely monitored to identify themes, trends and areas for improvement. Key themes over the preceding year were associated with delays in sending ambulances or occasions in which patients were asked to make their own way to hospital. The Trust had developed an action plan and was working with system partners to support patient safety during these periods of pressure. The excellent work of teams to provide a safe level of care was acknowledged in particular during ‘thankyou Thursday’ in which patient compliments were shared across the organisation. The DoN provided an example of some compliments received. |
| 4.4 | The Trust continued to deliver a high quality of service against the key clinical indicators. Delivery of the post return of circulation following cardiac arrest bundle and the care provided to heart attack patients positioned the Trust as one of the national leaders. For all conditions EEAST was performing above the national average position with the exception of one measure. Work had already been undertaken to deliver an improvement in the return of circulation on arrival. The sepsis bundle measure had been replaced nationally. Clinical care delivery continued to be strong within this. |
| 4.5 | There had been a 400% increase in serious incidents in 2021/22 compared with previous years. This was largely due to sustained operational pressures across health and social care leading to an increased response time to all patients. An action plan had been developed to improve all elements which contributed to delays in response which were within the organisation’s control. A key element of this action plan was to maintain the collaborative relationship with all partners and develop a framework for the system to investigate incidents in collaboration allowing for an end-to-end review of the patients care. There was a commitment to increasing the treatment provided to patients in the community through the implementation of non-conveyance care bundles which were designed to improve the safety of patients discharged from EEAST’s care to another part of the healthcare system. An electronic auditing tool had been developed to sit alongside the care bundles to improve the care provided to patients not requiring hospital care. |
| 4.6 | The NHS set key priorities for delivery within the national patient safety strategy. All organisations were required to appoint one patient safety specialist, EEAST had appointed five which demonstrated its commitment to ensuring patient safety. The Trust had increased infection prevention and control practices including increased vehicle cleaning and audits, continued use of COVID marshals and health and safety training to support a safe culture. The violence prevention and reduction standard had been implemented to provide a safe environment for colleagues and a trial of body worn cameras was underway nationally. The provision of generic risk assessments was used in all buildings and working areas. |
| **5.0** | **OBJECTIVE TWO: BE AN EXCEPTIONAL PLACE TO WORK, VOLUNTEER AND LEARN** |
| 5.1 | The Director of People Services, Marika Stephenson (DoPS) briefed the meeting on the activity undertaken during 2021/22 to ensure a workplace which was supportive and inclusive for all staff and volunteers. She was proud to join an organisation committed to responding positively to the changes over the last year. People development was a key priority, engaging and empowering leaders and colleagues to develop, adapt and embrace new ways of delivering the right care. There were a range of colleagues who enabled the frontline response including mechanics, clinicians, corporate functions and call handlers. Although support services did not respond directly to patients, they played a vital role in the delivery of a quality service. There was an almost 50/50 split of male and female employees which was untypical of the trend for NHS organisations. The largest staff group was frontline operational services. This was a young workforce with over three quarters of staff under 50 years of age. |
| 5.2 | The percentage of BAME staff had increased within the organisation which demonstrated the effectiveness of workstreams in place aimed at supporting an inclusive organisation. Increasing BAME representation improved relationships with the community served and delivered against the race pledge. Declared disabilities within the organisation continued to rise during 2021/22, improvements to this trend were attributed to ongoing activity to support colleagues to be comfortable in declaring disabilities with the confidence to know they would be treated fairly and equitably and would enhance their overall experience. |
| 5.3 | Staff turnover continued to increase during 2021/22 as the global job market awakened, turnover exceeded pre pandemic levels but followed national trends. By decreasing staff turnover through a structured plan the Trust started to retain valued skills and reduced costs associated with the replacement of colleagues. Leaver processes were reviewed and a retention strategy established to retain these skills. Improved exit interviews provided a wealth of information to identify causes for attrition. The establishment had been exceeded in the preceding year to support service delivery. The vacancy rate in April 2021 was reported at -1.46%. Turnover had since surpassed pre pandemic levels as movement of staff in the job market returned, this had a significant impact on the vacancy rate which was recorded as 0.51%. There was a sharp decline in candidate applications over the last six months as the competitive market returned. |
| 5.4 | Significant progress had been made to reduce employee relations cases, with 76% of legacy cases closed in year. This momentum was maintained by recruiting additional investigators to address both remaining and new cases. Average suspension times had reduced by 44%. Investment was underway to the substantive ER team to maintain this activity. |
| 5.5 | It was vital the organisation was operating as an open and inclusive place to work for all colleagues. There had been a 900% increase in those raising concerns through the Freedom to Speak Up process about poor behaviours seen or experienced. It was positive that staff felt able and willing to raise these concerns. 358 colleagues raised a concern with FTSU during 2021/22, an increase of over 72% from the previous year which provided assurance staff were increasingly aware and confident in how to raise a concern. The main themes raised was the application of systems and processes including policies and processes which may not be consistently followed including the recruitment process policy. |
| 5.6 | Colleagues were reporting they were increasingly tired both physically and emotionally but the pressures on the Trust from the pandemic and operational pressures had not diminished. The pandemic had been immensely demanding and emotionally exhausting. Colleague resilience at all levels had been tested over the preceding years which highlighted an urgent need to develop wellbeing capability and to improve the support provided through a range of wellbeing issues, in particular mental health issues. The health and wellbeing of colleagues was a priority, there had been heavy investment in the wellbeing capability and establishment of a new wellbeing team. |
| 5.7 | Hein Scheffer, Director of Strategy, Culture and Education (DoSCE) recognised the importance of ensuring clarity on the purpose and vision to enable the creation of the best possible culture for the organisation, to ensure colleagues were listened to, valued and empowered and to bring alive values and behaviour. Activity had been expanded to support this including the launch of interactive values workshops. |
| 5.8 | As part of the national staff survey, 48% of staff had provided their feedback on what it felt like working for EEAST. The score from this survey was the lowest among ambulance trusts which was disappointing but understandable given the work still required. The survey did recognise some improvements including a reduction in staff experiencing bullying from managers or feeling pressure to come into work when unwell. A greater number of staff felt safe to report unsafe clinical practice, indicating a culture which was becoming more open and could learn from mistakes when they occurred. This sense of increased safety was reflected in fewer colleagues experiencing violence from the public. However fewer colleagues would recommend the Trust as a place to work and more colleagues’ felt relationships were strained. In addition, concerns were raised about the ability to access training which was not unexpected given the sustained pressures across the NHS and health system. This would help to focus actions to sustainably address these concerns in 2022/23, progress would be measured against the NHS people pillars which outlined the vision for all those who work in the NHS. Further activity was required to tackle the deep rooted longstanding issues which had affected staff. The focus was on building on the initial steps to make the Trust a better place to work for everyone. |
| 5.9 | In June 2021 the Trust lost its accreditation as a provider of apprenticeships which led to a review of the training and education functions and enabled a focus on improving the learning environment for students and colleagues. EEAST worked with Health Education England to agree the process and a new training and education strategy for 2022/23 and beyond. The Trust completed the first stage of the development of an integrated people model which would inform strategic people planning across the Trust. All apprenticeship pathways were supported by West Suffolk College, by bringing the functions under this single organisation, a better experience could be provided for learners and educators. |
| 5.10 | It was of particular importance in challenging times to collaboratively improve service delivery through a formal leadership framework. Improvements were targeted in areas directed by staff including equality, diversity and inclusion, addressing imbalances in policies and processes, and the introduction of reciprocal mentoring for board and senior leaders alongside further work to embed the equality networks. |
| 5.11 | EEAST was committed to promoting inclusivity in all areas and had signed up to the anti-racism charter in partnership with Unison. The charter aimed to tackle racism in the public sector, recognising the impact of racism on our people and having an anti-racism programme in place to promote equality, diversity and inclusion. There was a focus on training, highlighting ethnicity pay gaps and ensuring a fair process in all proceedings such as applying for a job or going through a disciplinary process. To support change in this area the cultural ambassador programme had been launched. Ambassadors received training to sit as part of investigation teams, members of the disciplinary panels or on recruitment interview panels. They played an important role in ensuring all people received a positive experience working with EEAST and were able to advance their careers. There was more work required across all protected characteristics to improve inclusivity. The Trust had celebrated international women’s day in a collaborative online event hosted by Essex fire and rescue service, Essex police and Essex crime commissioner’s office. |
| **6.0** | **OBJECTIVE THREE: BE EXCELLENT COLLABORATORS AND INNOVATORS AS SYSTEM PARTNERS** |
| 6.1 | Kate Vaughton, Director of Integration (DoI) emphasised the value of partnership and system engagement for the Trust. The Trust received a wealth of support from volunteers which included community first responders, volunteer car drivers, chaplains, CEG, volunteer doctors and paramedics. Over the past year there had been continued efforts to ensure volunteers were safe whilst responding to patients and engaging with the public in local communities. Community first responders (CFRs) were medically trained and attended certain calls in their local communities as well as providing ongoing social support and adding value to their communities. This equated to 450,000 volunteer hours delivered in local communities attending to over 27,000 patients. The CFR training department trained all first responders from initial intake and into continued development. There was a sharp increase in volunteers over the last year as a result of an extensive recruitment campaign and training of an additional 298 CFRs and over 70 military and fire co responders. Falls CFRs attended patients who had experienced a fall at home and were discharged from the scene, this enabled a swifter response to these patients and enhanced their personal experiences. The Trust was proud of the dedication and hard work of all volunteers. |
| 6.2 | It was vital to support the delivery of care collaboratively, work was undertaken closely with acute primary and secondary care colleagues including GPs, hospitals, community health providers, mental health and social care providers. Work was undertaken across six integrated care partnerships to identify new ways of working to better support the patient population. EEAST undertook its first partnership survey in January 2022, this was released to key partners to strengthen the Trust’s understanding of how work was undertaken alongside partners, any gaps and activity which could be increased. Ongoing surveys would be released so progress could be tracked at locality and regional level. Feedback had been invaluable in informing the clinical model going forward. Key projects supported included mental health street triage, early intervention vehicles, Essex blue light collaboration, mental health joint response and silver frailty line. |
| **7.0** | **VISION: OUSTANDING PEOPLE, EXCEPTIONAL CARE, EVERY HOUR OF EVERY DAY** |
| 7.1 | Jon Moore, Deputy Chief Operating Officer (DCOO) highlighted the challenging operating period experienced during2021/22. This had been the most challenging year to date. The Trust received over one million calls, approx. 253,000 more calls than the previous year. 2021/22 was an extremely challenging year across the NHS, 999 calls were answered by dedicated call handling centres with automated resilience built into the system. Responding to an emergency call involved answering the call, assessing the level of severity and dispatching a resource to respond. A triage process was in place to ensure everybody received the right level of care for their condition. The national standard for call pick up was answering 999 calls within 5 seconds, the increased pressures and high call demand had made delivering this standard challenging. The service continued to be delivered alongside wider health and social care. There had been a significant increase in demand which was impacted by increased staff absence due to the COVID pandemic and rising handover delays which had resulted in extended response times beyond expectations. The national standard for responding to the sickest patients was 7 minutes and to respond to nine out of ten of these patients within 15 minutes. EEAST had an average response time of 9m 50 seconds and to nine out of 10 in under 18 mins 10s. Alternative care pathways were supported for 10% of patients through hear and treat who were supported by clinicians to access alternative resources including a pharmacist, GP or another alternative care pathway. EEAST was one of the top performing ambulance services in the country for the safe management of patients through hear and treat. Single point of contact had been established to enable colleagues to support patients to access the right care to meet their needs. EEAST staff were able to refer patients to alternative care services through a 24/7 phoneline such as diabetic and out of hours nursing services. Single point of contact had support patient care on around 125,000 occasions. Of the 827,000 incidents attended, 10% were categorised as the highest priority and 59% were in the second highest category, all of these incidents were responded to by EEAST staff. |
| 7.2 | An important part of winter pressure planning was to reduce the period for handovers at hospital, any delay could impact the patient and increase the time to respond to another emergency call in the community. There had been a significant loss in ambulance hours as a result of these delays which increased the time to respond to patients in the community. EEAST was working in collaboration with regulators, commissioners and hospitals to reduce these delays. The time to handover patients increased in year, when demand, sickness and handover delays were at their highest patients experienced the longest waits for an ambulance response. The handover escalation protocol continued to be implemented to rapidly identify cases of concern and work together to address delays and accelerate care. Contingency measures were developed to support ongoing delivery of services which included increased recruitment, greater collaboration and new ways of working which provided additional resources to respond to more 999 calls. The pressures resulted in extended response times beyond expectation, In February-April more than 18% of ambulances were delayed more than an hour handing over patients, rather than the 15 minute national standard. |
| 7.3 | EEAST continued to deliver a number of non-emergency patient transport services (PTS) across the region. In 2021/22 the Trust delivered a successful service and supported the transportation of covid 19 positive patients throughout the region. In 2021/22 552,654 patient transports were supported in addition to the transport of 7,631 covid positive patients. Whilst total journey numbers were lower than previous years, this included a high number of patients who must travel alone. It was challenging to balance the number of resources to deliver a cost efficient and effective service which was further compounded by the reduction in average vehicle utilisation from 3.7 patients per run to 1.4 to ensure social distancing could be maintained. Flexible working arrangements were maintained, alongside the increased use of private ambulance providers and upskilling of CFRs, student paramedics and military personnel to work alongside PTS colleagues. |
| 7.4 | The resilience and specialist operations team was involved in responding to and helping the organisation prepare for any untoward, adverse or the potential for serious major incidents and terrorist attacks. The hazardous area response team (HART) responded to any patients requiring assistance in a hazardous situation or were hard to reach. Over the year this included responding to patients around water, at height and in confined spaces. They also continued to deliver multi agency training with police, fire and health services to respond to marauding terrorist attack and rollout of command training for those taking a command role during a critical or major incident. Each year NHS trusts completed an annual self-assessment against the NHS emergency preparedness and resilience framework in line with the civil contingencies act. Overall compliance was maintained at substantial. To ensure continued development and following external audit, an action plan was maintained to support the delivery of a high level of service. |
| **8.0** | **OBJECTIVE FOUR: BE AN ENVIRONMENTALLY AND FINANCIALLY SUSTAINABLE ORGANISATION** |
| 8.1 | Kevin Smith, Director of Finance (DoF) highlighted the activity to support sustainability. The sustainability message continued to gather momentum and drive a positive impact. The green champion network was flourishing and supported activity across the Trust working to deliver against the green plan. Green champions, supported, influenced and encouraged changing behaviours within the Trust and local communities. This was supported by the non-executive green champion to ensure full board oversight. Sustainability actions included the installation of low energy lighting at key sites, the building management system was upgraded to reduce energy consumption, replacement of old storage heater controls delivered a more energy efficient system and oil heating systems were removed from the Stansted Ambulance station which would reduce energy costs. Energy efficient boilers were installed, and a new waste management contract was in place to reduce the level of waste taken to landfill. All electric contracts were 100% renewable and sustainability assurance information had been included in all tenders. Strategic locations were identified to support the implementation of charging stations to transition to an electric fleet. |
| 8.2 | The Trust technology investment was driven by sustainability matters, where possible remanufactured technology was bought, and the carbon footprint reduced working with suppliers. Every remanufactured laptop purchased saved 190,000 litres of water and 316kg of CO2. The Trust had bought over 500 remanufactured devices and the provider planted five trees for every device brought which maximised the emissions savings. The five-year digital strategy was focussed on frontline digitisation, it finalised key digital improvements including the digital 999 call handling platform in use across all three ambulance operations centres. Networks were updated to remove old, slow connections. An ipad based electronic patient care record was completed and enabled records to be recorded electronically and passed to hospitals within the region. The piloting of accessing summary care records, child protection information and end of life care records provided access to these records on the move. |
| 8.3 | The Trust achieved a small deficit of £10m against a total expenditure of £410m, of this £36m was directly related to COVID. Despite operational pressures, £3.8m in cost improvements were supported and £10.6m invested in capital expenditure predominantly within the estate and digital. External audit, following a review of the accounts, had confirmed the accounts provided a true and fair representation of the Trusts transactions. |
| **9.0** | **OUR AMBITIONS FOR THE FUTURE** |
| 9.1 | Tom Abell, Chief Executive Officer (CEO) reflected on the challenges across the NHS during2021/22 which included the expense of COVID, reorganisation of the health service into integrated health systems and a new profile of need from communities and partners. It was vital to continue to address areas of challenge associated with culture, the core license to practice and regulatory actions. There had been some good progress made but further work was required. It was vital to continue to improve the service for communities, staff, and partners. Priorities were focussed around the strategic objectives. All of these things should be underpinned by the values of care, teamwork, quality, respect and honesty. Work remained underway to continue to develop the programme to address cultural and regulatory issues as part of the fit for the future programme. The Trust was pushing forward a change in the way service was delivered in partnership with other organisations to improve care for communities and operational performance. A number of statements were developed to describe how this progress would be measured. The CEO recognised the fantastic work of the Trust and our people over the preceding 12 months, he reflected on how staff and volunteers had stepped up during a challenging period to respond to the needs of local communities. He also extended his thanks to partners and local communities for the support provided to the Trust. |
| **10.0** | **QUESTIONS FROM THE PUBLIC** |
| 10.1 | There were no questions from the public. |
| **11.0** | **CLOSING ADMINISTRATION** |
| 11.1 | The TC extended her thanks to all colleagues who continued to focus on responding to patients needs and delivering the best possible care during their time in need. |
| 11.2 | There was no other business and the meeting closed at 15:30. |