



AGENDA ITEM
4.2

EMERGENCY AMBULANCE SERVICES COMMITTEE

TEMPORARY AMENDMENTS TO MODEL STANDING ORDERS, RESERVATION AND DELEGATION OF POWERS – LOCAL HEALTH BOARDS, NHS TRUSTS, WELSH HEALTH SPECIALISED SERVICES COMMITTEE, EMERGENCY AMBULANCE SERVICES COMMITTEE AND HEALTH EDUCATION AND IMPROVEMENT WALES
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Date of meeting	14/07/2020
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FOI Status	Open/Public
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If closed please indicate reason	Choose an item.
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Prepared by	Gwenan Roberts, Assistant Director Corporate
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Presented by	Gwenan Roberts, Assistant Director Corporate
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Approving Executive Sponsor	CHIEF AMBULANCE SERVICES COMMISSIONER
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Report purpose	FOR APPROVAL
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
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Committee/Group/Individuals	Date	Outcome

1. SITUATION/BACKGROUND

- 1.1 Members will be aware that a Welsh Health Circular was published on 9 July 2020 which required NHS organisations to make the necessary temporary variations to Standing Orders and Reservation and Delegation of Powers with immediate effect.
- 1.2 The changes need to be made before 30 July 2020.



- 1.3 The temporary amendments will cease to have effect on the 31 March 2021 or where an appointment(s) has been made under the ***National Health Service (Temporary Disapplication of Tenure of Office) (Wales) (Coronavirus) Regulations 2020*** at the end of that term, whichever is the later.
- 1.4 Regulation 10(1) of the Emergency Ambulance Services Committee (Wales) Regulations 2014 place a duty on each Local Health Board to agree Standing Orders for the regulation of meetings and proceedings of the joint committee. Regulation 15(5) of the Local Health Boards (Constitution, Membership and Procedures (Wales) Regulations 2009 also require that where a joint committee has been established, the Board must approve any Standing Orders that may be made by that committee.

Background

- 1.5 Members will be aware that the membership regulations for NHS boards and committees in Wales, in most cases, restrict a person from being appointed for a period of no longer than four years and holding office as a member or an associate member for a total period of no more than eight years. Although the Commissioner for Public Appointments' Governance Code provides some flexibility to ensure the continued operation of NHS boards/committees, any person who is nearing the end of their maximum tenure of office, as prescribed in legislation, would be required to leave office as they will no longer be eligible for re-appointment.
- 1.6 A number of key appointments on health boards/committees are due to end their tenure during the next 9 months. Due to the temporary suspension of all public appointments in March 2020 in Wales and the time required to re-start the appointment process as the restrictions are lifted, board and committees would potentially have a number of key vacant positions. The ***National Health Service (Temporary Disapplication of Tenure of Office) (Wales) (Coronavirus) Regulations 2020*** will ensure that during such a critical and challenging period for the health sector in responding and recovering from the impact of COVID-19, boards and committees do not to carry vacancies, allowing them to function properly and support good and effective board governance.
- 1.7 The Regulations will dis-apply the statutory maximum tenure of office to ensure any board or committee member who is nearing the end of their statutory maximum tenure of office is eligible for re-appointment. Any re-appointments will be made in accordance with the Commissioner for Public Appointments' Governance Code which includes allowing an appointee to hold office for a maximum of ten years.



- 1.8 In relation to the EASC the Regulations temporarily dis-apply the following:
- Regulations 6(5) and 7(4) of the Emergency Ambulance Services Committee (Wales) Regulations 2014.

2. **SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)**

- 2.1 The Committee is asked to approve the temporary arrangements in order that they can be agreed by every health board before 30 July.
- 2.2 These temporary changes to the EASC Model Standing Orders are shown in italics:

Page 16 – **1.4 Appointment and tenure of Joint Committee members**

1.4.1 The *Chair*, appointed by the Minister for Health and Social Services shall be appointed for a period specified by the Welsh Ministers, but for no longer than 4 years in any one term. The Chair may be reappointed but may not serve a total period of more than 8 years, *with the exception of those appointed or re-appointed in accordance with Regulation 4 of the National Health Service (Temporary Disapplication of Tenure of Office) (Wales) (Coronavirus) Regulations 2020. These members will hold office in accordance with the terms of their appointment or re-appointment. Time served need not be consecutive and will still be counted towards the total period even where there is a break in the term.*

1.4.2 The ***Vice Chair*** and two other ***Independent Members*** shall be appointed by the Joint Committee from existing Independent Members of the seven Local Health Boards for a period of no longer than two years in any one term. These members may be reappointed but may not serve a total period of more than 4 years, in line with that individual's term of office on any LHB Board, *with the exception of those appointed or re-appointed in accordance with Regulation 4 of the National Health Service (Temporary Disapplication of Tenure of Office) (Wales) (Coronavirus) Regulations 2020. These members will hold office in accordance with the terms of their appointment or re-appointment. Time served need not be consecutive and will still be counted towards the total period even where there is a break in the term.*

3. **KEY RISKS/MATTERS FOR ESCALATION TO THE COMMITTEE**

- 3.1 There are no specific risks to the Committee, these changes are required across NHS Wales.



4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outlined in this report.
Related Health and Care standard(s)	Governance, Leadership and Accountability
Equality impact assessment completed	Not required
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Commissioning Intentions	The Committee's overarching role is to ensure its Commissioning Strategy for Emergency Ambulance Services utilising the five step patient pathway outlined within the National Collaborative Commissioning Quality and Delivery Agreement and the related outcomes for each care standard aligned with the Institute of Healthcare Improvement's (IHI) 'Quadruple Aim' are being progressed.
Link to Main WBFG Act Objective	Work collaboratively with our public service partners and a broader range of partners to join up health and other services where this potentially represents better value for our residents and care users

5. RECOMMENDATION

5.1 The Emergency Ambulance Services Committee is asked to:

- **APPROVE** the changes for ratification at all Health Board meetings before the end of July 2020
- **NOTE** the temporary arrangements will cease to have effect on the 31 March 2021.