



**Minutes of the meeting of the Finance and Performance Committee
held in public on 26.8.21 via Teams**

Present: John Cunliffe Eifion Jones Linda Tomos	Independent Member / Committee Chair Independent Member / Committee Vice Chair Independent Member
In Attendance: Neil Bradshaw Louise Brereton Andrew Doughton Nick Graham Dave Harries Gill Harris Sue Hill Ian Howard Jugnu Mahajan Roshan Robati, Ian Smith Tom Stanford Chris Stockport Dr Chris Subbe Rod Taylor Clive Walsh Jo Whitehead Kamala Williams	Assistant Director Capital Board Secretary Audit Wales (<i>observing</i>) Associate Director Workforce Planning & Performance Head of Internal Audit Executive Director Nursing & Midwifery Executive Director of Finance Assistant Director - Business and Strategic Analysis Interim Deputy Executive Medical Director Programme Director for Unscheduled Care USC Director of Nursing Mental Health and Learning Disabilities Interim Finance Director – Operational Finance Executive Director of Primary Care & Community Services Senior Clinical Lead for USC Director of Estates and Facilities Interim Director of Delivery Chief Executive (part) Acting Director of Performance

Agenda Item Discussed	Action By
<p>FP21/126 Chair’s introductory remarks and apologies for absence</p> <p>Apologies were received from Mark Wilkinson, Sue Green for whom Nick Graham deputised and Nick Lyons for whom Jugnu Mahajan to deputised.</p> <p>FP21/94.1 The Chair welcomed everyone to the meeting and recorded the following Chair’s Action</p> <p>North Wales Managed Clinical Services (NWMCS) – Renewal of contract for a ‘Mobile PET CT Imaging Service’ in North Wales pending the approval and introduction of a permanent facility</p> <p>The Board and F&P Chairs approved the proposal to go out to retender for a mobile PET CT service to be provided in North Wales, most likely to be continued on the Wrexham Maelor site, for onward submission to Welsh Government. The tender period of up to 4 years will ensure the availability of a North Wales service for the North</p>	

<p>Wales population whilst, subject to final approval, an improved static facility is developed.</p>	
<p>FP21/127 Declaration of Interests</p> <p>Independent Member Eifion Jones declared an interest in item FP21/140 Residential Accommodation – proposal to move to a managed services model and advised he would absent himself from the meeting in discussion of the item, given his recent appointment as Chair of Adra.</p>	
<p>FP21/128 Draft minutes of the previous meeting held on 24.6.21 and summary action plan</p> <p>The minutes were approved as an accurate record, and updates were provided to the summary action log</p>	
<p>FP21/129 Board Assurance Framework (BAF)</p> <p>FP21/129.1 The Board Secretary presented the report which had been agreed at the Risk Management Group the previous week. She highlighted that the Good Governance Institute was supporting BCU and that the BAF would be reset following the Living Healthier, Staying Well strategy refresh taking place in the Autumn.</p> <p>FP21/129.2 Following discussion of the document it was agreed that the Board Secretary would consider the Estates risks and their risk levels in order to rationalise their different scorings. Clarity in regard to the discrepancy between risk appetite and target risk was also requested.</p> <p>FP21/129.3 The Chief Executive acknowledged the BAF to be work in progress however, she was keen to ensure that risk consideration became a golden thread that would be embedded throughout operational business.</p> <p>It was resolved that the Committee reviewed and noted the progress on the Principal Risks as set out in the Board Assurance Framework.</p>	<p>LB</p>
<p>FP21/130 Operational Plan 2021/22 monitoring report</p> <p>FP21/130.1 The Acting Director of Performance presented this report and highlighted the position of the 16 RAG rated actions. Themes were emerging around 3 themes</p> <ul style="list-style-type: none"> • Issues around staffing with non-availability and changing recruitment processes which would require lessons to be learned • General slippage within programmes which needed to be addressed with SMART actions whilst appreciating that some of these were not within the Health Boards control 	

<ul style="list-style-type: none"> • Business case progress whilst awaiting approval would require improved guidance within BC development and this was understood to be progressed by programme leads. <p>FP21/130.2 The Chief Executive stated that the planning process was being discussed to enable a lighter touch and ensure delivery, she provided examples of areas which needed to be moved forward eg Mental Health, Sustainability and Planned Care Recovery amongst others.</p> <p>FP21/130.3 In discussion of Health and Safety schemes which were Red RAG rated it was agreed that the Acting Director of Performance could improve the efficiency of Business case processes through accessing Executive Team minutes within this area. The Committee Chairman emphasised the need for the Committee to recognise actions which were ‘off track’ and understand the actions being undertaken to realign. It was agreed that he would be advised outside the meeting what potential alternatives there might be to Clinical Psychologists to address “ E1.5: Enhanced recovery from critical illness Recruitment of Clinical Psychologists has been unsuccessful. Further adverts will be placed and alternative sources of Clinical Psychologists sought.” He also questioned whether there might be risk to highlight as the WG 2020 Maternity Statistics were being questioned by other Health Boards (R10.2: Implement the National MiS solution for Wales (HIW, November 2020)).</p> <p>FP21/130.4 The Committee questioned whether there was effective join up in regard to M1.5: CAMHS: We will develop an appropriate interface with child and adolescent mental health services to ensure the most effective transition for young people with mental health conditions into adult services. In regard to M10: Forensic Services: Development of a model for forensic and low secure provision for both mental health and learning disabilities services in North Wales the Committee questioned how progress would be moved forward given the response provided within the report. Following further comment by the Committee Chair in regard to Mental Health narrative provided, the Executive Director of Finance undertook to improve the streamlining of future reports and arrange for feedback to be provided in relation to the comments made on specific plan actions.</p> <p>It was resolved that the Committee noted the report</p>	<p>SH-KW</p> <p>SH-KW</p> <p>SH</p>
<p>FP21/131 Quality and Performance Report</p> <p>FP21/131.1 The Acting Director of Performance presented this report. She highlighted the Covid19 update drawing attention to the current highest number of incidences in Wales within the Community and work that was ongoing to reach out to younger age groups. It was noted that the Stroke Improvement plan, which had been delayed by 3 months, was moving back on track. Some performance improvements were noted eg Cancer services and successes with vaccination rates. However, the Committee questioned whether Cancer performance rates were being affected by Primary Care</p>	

<p>behaviour which the Executive Director of Primary and Community Care agreed to explore further.</p> <p>FP21/131.2 There was deterioration on the waiting list position, diagnostics, planned and unscheduled care which were all being addressed.</p> <p>FP21/131.3 Improvement to the provision of all datasets was being worked on by the Performance Team however, the Committee requested that the following updates be circulated to members : Cardiology and a further assurance update on Ophthalmology /Eye care business cases which had been delayed. The Committee also questioned what was meant by poor IT infrastructure as referenced in regard to Endoscopy.</p> <p>FP21/131.4 The Committee questioned the format of other Health Board performance reports and was advised that workshops had previously taken place in this regard and BCU was reassuringly one of the top reports in regard to formatting. Availability of benchmarking and WG statistics were also discussed.</p> <p>FP21/131.5 In discussion of ED performance, the Committee Chair questioned how learning from previous enabling plans was being managed. The Chief Executive requested that this be addressed within the next report.</p> <p>FP21/131.6 The Committee was keen to emphasise concern in respect of the importance of staff welfare. It was noted that whilst work was ongoing to improve PADR rates, initiatives such as the Staff Wellbeing Service had been introduced. The Committee requested that staff turnover be dealt with as an area of focus. Recruitment and Retention was also highlighted as cause for concern.</p> <p>It was resolved that the Finance and Performance Committee scrutinised the report.</p>	<p>SH-KW</p> <p>SH- KW</p>
<p>FP21/132 Planned Care Update</p> <p>FP21/132.1 The recently appointed Interim Director of Delivery presented this update report. It was noted that daily discussions with Welsh Government was taking place to move forward the development of the Regional Treatment Centres (formerly referred to as Diagnostic Treatment Centres DTCs). He also advised that an Orthopaedic Outsourcing solution was progressing and could be concluded within weeks. Whilst elective interventions had been reintroduced on all sites, emergency department pressures were high. ITU availability had been impacted.</p> <p>FP21/132.2 The Interim Director of Delivery reported that Planned Care plans were to be recast by 13 September should the gap increase in order to mitigate risks. Discussion ensued on concerning low levels of theatre activity, including whether weekend working had been progressed. However, the Interim Director of Delivery indicated that levels were likely to remain as present due to Covid19 issues.</p> <p>FP21/132.3 The Committee questioned when the delayed Surgical Robot would be delivered to Ysbyty Gwynedd. It was understood that confirmation of supplier was to be expected within 10 days, following which an implementation plan could be moved</p>	

forward. The Executive Director of Nursing and Midwifery advised this to be the subject of Executive Team discussion along with replacement of a robotic surgeon and also more urology surgeon recruitment.

It was resolved that the Committee

- noted that the backlog clearance has commenced with high risk stratified patients being treated in order of priority
- noted the update on the specifications and tendering for insourcing and outsourcing
- recognised the complexity of the work and the requirement for Executive and Board support in meeting the challenges and opportunities that lie ahead in the recovery programme.

FP21/133 Unscheduled Care update

FP21/133.1 The Senior Clinical USC Lead introduced the structure and metrics programme which had been moved forward and advised that the improvement programme work was continuing to be supported by the National Commissioning Collaborative Unit (NCCU). Four workstreams had been identified as Step-up in the community, Hospital front door, In-patient care and Step-down into the community. The USC Programme Director emphasised that improvement was the priority for all involved and that data driven decision making was taking place. An unscheduled care dashboard was being developed along with other metrics that could identify blockages in pathways. He also advised that a Workforce working group was working on recruitment and linkages with other areas of the system.

FP21/133.2 In response to the Committee's question regarding deliverability confidence, given the involvement of other partners, the Senior USC Lead advised that large scale cultural change, working practices and morale needed to be addressed however, currently microstructures were being focussed upon to ensure changes could be 'seen' as well as promoting staff ownership of data. In respect of the expected improvement upon the introduction of the 111 service, he stated that this had not had an impact however ongoing work with WAST and WG was ongoing to achieve improvement.

FP21/133.3 A discussion on the impact of tourism on the service took place, including repatriation however the Senior USC Clinical Lead advised that the influx was not the reason for issues and that focus needed to be maintained on the bigger issues. The USC Programme Director pointed out that there was higher acuity and more walk-in patients were noted to be attending. The Executive Director of Nursing and Midwifery advised that there was a high number of Medically Fit for Discharge patients in hospital beds and plans were being led by the Chief Executive to resolve the issues with partner organisations. She also drew attention to the Kendal Bluck work.

FP21/133.4 The Interim Deputy Executive Medical Director questioned the level of support from Local Authorities and also how GPs were involved. The Committee Chair sought assurance that previous improvements that had been introduced had been embedded and not been lost.

<p>It was resolved that the Committee noted the update provided on the development of the Urgent and Emergency Care improvement programme of work</p>	
<p>FP21/134 Transformation update</p> <p>FP21/134.1 The Executive Director of Primary Care and Community Services presented the report and in addition advised that the Transformation Director and Deputy Transformation Director would start in their roles within 3 weeks and had already input positively prior to commencement. The Committee sought greater assurance on how the programme would successfully underpin the organisation's transformational journey. The Chief Executive and Executive Director of Primary and Community Services gave an undertaking that this would be clearly articulated within the next report.</p> <p>FP21/134.2 While the Committee was supportive of this programme it emphasised the need to prioritise recruitment and retention as an area for support and improvement. The Committee Chair commented on the size of the font used for the example website pathway given that it was for optometry. He also questioned how pathways would be captured beyond just a decision for surgery or how people were progressing through a pathway.</p> <p>It was resolved that the Committee noted the update paper which outlines the further progress in re-shaping our transformation function.</p>	<p>CS</p> <p>CS</p>
<p>FP21/135 Capital Programme report Month 4</p> <p>FP21/135.1 The Assistant Director Capital Planning presented the report. He drew the Committee's attention to potential for further WG capital investment which had required a rapid submission turnaround that had been primarily focussed on quickly deliverable schemes. The outcome was awaited.</p> <p>FP21/135.2 In response to the Committee Chair, he agreed to continue to provide cumulative graphs in all future reports. Following discussion of the significant decanting plans at Wrexham Maelor, the Chief Executive advised that an additional Board workshop discussion would be arranged due to the volume of beds potentially affected.</p> <p>It was resolved that the Committee received and scrutinised the report.</p>	<p>NB</p>
<p>FP21/136 Financial strategy - draft principles</p> <p>The Financial Strategy presentation was provided by the Executive Director of Finance. It was noted to be in alignment with the Board's other major strategies eg Digital etc and had been shared with other Health Boards and WG's Financial Delivery Unit.</p>	

<p>The Committee was also keen that sufficient funds were made available to enable Invest to Save initiatives. The Chair asked for the cover sheet to be corrected to reflect that the Socio economic duty was applicable to the Finance Strategy. It was resolved that the Committee noted the report</p>	SH
<p>FP21/137 Finance Report Months 3 & 4</p> <p>FP21/137.1 The Executive Director of Finance presented the Finance report for month 4 highlighting the headlines which included the Covid19 position forecast. Whilst the Committee commended the current good financial position of a balanced forecast and savings delivery that had been achieved, the Committee Chair asked how reliable this was. It was noted that Savings would be discussed in the next item.</p> <p>FP21/137.2 In regard to the report, the Executive Director of Finance agreed to address the graph issue on page 11 of the report in relation to primary care drugs which appeared to be out of sequence with previous data and also the narrative/graph in regard to non-pay graph. However, it was noted that prescribing data was only available 2 months in arrears.</p> <p>FP21/137.3 In response to the Committee it was confirmed that Welsh Government would fund the staff pay award when finally agreed.</p> <p>It was resolved that the reports be noted</p>	SH
<p>FP21/138 Savings report month 4</p> <p>FP21/138.1 The Executive Director of Finance presented this report and highlighted the marked variation between Area and Acute sites – the latter of which required greater support. Whilst delivery was forecast, there was concern over recurrent deliverables. She stated that there was a need to focus on a move to transformation so that there was less transactional. The Executive Director of Finance advised that monthly review meetings were taking place to work through a range of opportunities which needed to be woven together to ensure adequate resources to move them forward and there was no potential conflict for other services and schemes.</p> <p>FP21/138.2 Discussion ensued on concern regarding the continuous identification of savings schemes in which the Executive Director of Finance reminded that this was the first time BCU had the opportunity to develop 3 year savings schemes. The Committee also questioned resourcing of the current savings team and raised concern on the impact of external factors such as long covid on plans.</p> <p>FP21/138.3 The Head of Internal Audit questioned what support was being offered to address Red schemes at Ysbyty Glan Clwyd. The Executive Director of Finance advised that they would be worked through as part of Secondary Care programme but she agreed to discuss this further with the Head of Internal Audit outside the meeting.</p> <p>It was resolved that the Committee noted the current savings plans and forecast delivery, along with the opportunities identified to address the recurring savings deficit.</p>	SH

<p>FP21/139 Workforce quarterly report</p> <p>FP21/139.1 The Associate Director Workforce Planning & Performance presented the quarterly report, highlighting the workforce dashboard, GP medium and long term plans being worked on, Recruitment and Agency positions. He advised that the Kendal Bluck work was being moved forward within a separate group.</p> <p>FP21/139.2 The Committee commented that the information provided on recruitment had been particularly useful. The Chief Executive spoke of the workforce systems, process improvements and gap identification undertaken as positive steps forward, and she looked forward to the results of wider workforce process appraisals as part of the improvement ethos being worked on.</p> <p>FP21/139.3 In the discussion which ensued the Associate Director Workforce Planning and Performance undertook to advise whether there had been an improvement in regard to the provision of bilingual staff following the introduction of the Bilingual Skills Policy. The Committee questioned why staff vaccination was not closer to 100% and whether there were barriers to participation. The Associate Director Workforce Planning & Performance responded that staff uptake was still being encouraged, however it should be noted that not all those choosing not to be vaccinated were in direct patient contact. He also confirmed that the 10 day isolation policy was impacting on the workforce however, with Lateral Flow Device testing in place, improvements were expected shortly.</p> <p>It was resolved that the Committee noted the report and planned improvements to reporting.</p>	<p>SG -NG</p>
<p><i>Independent Member Mr Eifion Jones absented himself from the meeting for the duration of this item.</i></p> <p>FP21/140 Residential Accommodation – proposal to move to a managed services model</p> <p>FP21/140.1 The Executive Director of Estates and Facilities joined the meeting to present this item and drew attention to the background and proposal set out in the report which also included a timeline. He advised that we are working with procurement colleagues to engage with partners with the appropriate skills and experience, including social housing providers.</p> <p>FP21/140.2 The Committee questioned whether there would be loss of revenue income ie rent or other consequences. In response, the Executive Director of Finance agreed but this would be partially offset by savings on maintenance and that improving the quality of accommodation would be the right thing to do.</p> <p>Recommendation It was resolved that the Committee</p>	

<ul style="list-style-type: none"> • approved the procurement proposal for a residential accommodation managed service model as detailed within this report. • noted the continued opportunities to work collaboratively with local social housing providers in developing the service specification. 	
<p>FP21/141 Welsh Community Care Information System Business Case (WCCIS)</p> <p>The Committee raised a number of questions in relation to the business case which required clarification. It was confirmed that this implementation was a proptotype. Future further scale up and implementaion would require additional funding, identification of the funding source and would need to return to the Committee for approval.</p> <p>It was resolved that the Committee approved the phased implementation of WCCIS and reviewed the success of the 1st phase at an appropriate stage before approving the final business case.</p>	
<p>FP21/142 Delivery of Primary Care Audiology Services – business case</p> <p>FP21/142.1 The Executive Director of Primary Care and Community Services presented this paper which described the proposal for extension of Primary Care Audiology services across North Wales, providing background/strategic context. In response to the Committee Chair, the Executive Director of Finance confirmed that funding was included within the current Operational Plan for this service and through performance funding in subsequent years.</p> <p>FP21/142.2 The Committee questioned why there were not any clinics provided south of Porthmadog and was advised that, whilst this was historical, there would be embedded provision within primary care into the future. In discussion of audiology provision within schools, the Executive Director of Primary Care and Community Services undertook to circulate a briefing note to members in respect of school audiology services.</p> <p>It was resolved that the Committee approved implementation of a Primary Care Audiology Service across North Wales, as described within the health board annual plan for 2021/22.</p>	CS
<p>FP21/144 North Wales Endoscopy Service : Insourcing of Endoscopy services</p> <p>FP21/144.1 The Chief Executive explained that this interim solution was to enable work to either further develop a Endoscopy business case or integrate plans within the developing Regional Treatment Centre plans.</p> <p>FP21/144.2 In response to the Committee Chair it was confirmed that the Exeutive Team had approved the insourcing of this service as outlined and that £19.4m of additional resource had been allocated. He requested that any future papers be transparent in regard to funding resource.</p>	

<p>FP21/144.3 The Committee was supportive of the interim solution pending progress of the developments advised.</p> <p>It was resolved that the Committee approved funding to continue insourcing of Endoscopy Services across the 3 hospital sites for 4 months from August to December 2021 to maintain capacity, address increasing demand, reduce the backlog and ensure safe clinical services for patients.</p>	
<p>FP21/145 F02 - Lease Car Policy and Procedure</p> <p>FP21/145.1 The Committee questioned the financial implications of the policy and whether it impacted on BCU's carbon footprint. The Executive Director of Finance advised that as the scheme was salary sacrifice funded the organisation benefitted and that hybrid and electric cars were being incentivised. She confirmed that whilst the awareness of pool car availability was generally high, there were issues that were difficult to manage in regard to journey times etc. It was noted that savings in the region of £2m had been achieved through the increased use of virtual meetings as a result of the Covid19 response.</p> <p>FP21/145.2 Following a question raised by the Committee Chair in regard to whether the policy only applied to grey fleet, the Executive Director of Finance undertook to amend the policy title should the content be pertinent to other vehicles in respect of fuel/electric personal useage.</p> <p>It was resolved that the Committee approved the updated version of Financial Procedure F02 – Lease Car Policy and Procedure subject to clarity on the title as outlined above.</p>	SH
<p>FP21/146 External Contracts Q1 report</p> <p>In discussion of the report the Executive Director of Finance undertook to address issues raised in regard to the domiciliary care information provided.</p> <p>It was resolved that the Committee noted</p> <ul style="list-style-type: none"> • the financial position on the main external contracts as reported at Quarter 1 2021/22. • the work underway in respect of stabilising wider health / patient care contracts and key risks / related activity. • the impact of Covid-19 on external healthcare contracts. • the impact and risk posed as a result of Covid-19 revised contracting arrangements adopted for contracts with NHS Providers and Commissioners. • the work underway in respect of increasing planned care capacity • the risks associated with the current contractual arrangements with independent care home and domiciliary care providers and actions being taken • the work underway to increase capacity within the team and develop robust governance and scrutiny arrangements <p>approve</p> <ul style="list-style-type: none"> • the proposals in relation to third sector commissioning 	SH

FP21/143 Adult and Older Person’s Mental Health Unit Glan Clwyd Hospital – Outline Business Case

FP21/143.1 The Executive Director of Public Health, Director of Nursing Mental Health and Learning Disabilities (MHL D), Assistant Director Planning – Capital and Assistant Director - Business and Strategic Analysis joined the meeting for this item.

FP21/143.2 The Executive Director of Public Health, as Senior Responsible Officer for this development, stated it was important to note that the facilities of the current location were not fit for purpose and that this was a new unit model that would not be named as previously. She advised that a programme board was in place with partners, with a clinical focus with commitment from both partners and service users. She highlighted the increased monetary value of the Outline Business Case (compared with the strategic outline case) but emphasised it was important to ensure that the right case be put forward.

FP21/143.3 The Committee commended the strategic OBC and questioned what level of engagement and confidence there was with Welsh Government (WG). The Executive Director of Public Health confirmed that WG had been appraised as the OBC had developed and were supportive of the model of care. The Assistant Director - Business and Strategic Analysis advised WG to be cogniscent of the increased financial resource, whilst the Director of Nursing MHL D highlighted the bed numbers, the impact of Covid19 pandemic response, and potential future requirements.

FP21/143.4 The Committee questioned communication plans. The Executive Director of Public Health advised this to be a significant piece of work involving local communities and staff. It was also understood that engagement was underway with the Community Health Council (CHC) and they had agreed to nominate a representative to sit on the Programme Board. It was noted that public involvement would be included as the Business case moved through its development stages.

FP21/143.5 The Committee questioned whether a potential new housing development nearby might affect planning however, the Assistant Director of Capital advised that the new site did not have neighbouring property, and that Planning Officers were currently very supportive. It was noted that planning permission would be sought approximately 6 months from approval of the OBC when a detailed plan would be formed. The Committee went on to discuss the current issues with providing the Older Person’s service at Bryn Hesketh in which the advantages of resiteing were highlighted. The Chief Executive stated that the Executive Director of Public Health continues to liaise with area Central colleagues and the Executive Director of Primary Care and Community Services, in terms of transition pathway opportunities.

It was resolved that the Committee

- was fully supportive of the development, especially in regard to change of name
- approved the Business Case for submission to the Board. Subject to Board approval the case will then be submitted to Welsh Government.

FP21/147 Monthly Monitoring Returns month 3&4 report

<p>It was resolved that the Committee noted the contents of the report that has been made to Welsh Government about the Health Board's financial position for Month 3 and 4 of 2021/22.</p>	
<p>FP21/148 Business Case Tracker</p> <p>It was resolved that the Committee noted the contents of the business case trackers.</p>	
<p>FP21/149 Summary of Private business to be reported in public</p> <p>It was resolved that the Committee noted the report.</p>	
<p>FP21/150 Issues of significance to inform the Chair's assurance report</p> <p>To be agreed outside of the meeting.</p>	
<p>FP21/156 Date of next meeting</p> <p>This was the last meeting of the Finance and Performance Committee following the Integrated Governance Framework agreed by the Board in July 2021.</p>	
<p>Exclusion of the Press and Public</p> <p>It was resolved that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960.</p>	