



**Minutes of the meeting of the  
Performance, Finance and Information Governance Committee (PFIGC)  
held in public on 22.2.24 in the Boardroom, Carlton Court and via Teams**

<p><b>Present:</b> Gareth Williams Clare Budden Prof Mike Larvin</p>	<p>Independent Member / Committee Chair Independent Member (IM) Independent Member</p>
<p><b>In Attendance:</b> Russell Caldicott Nesta Collingridge Adele Gittoes Nick Graham Paul Carter  Michelle Greene Dr Nick Lyons Phil Meakin Lisa Parry Paolo Tardivel Andy Whitfield Angela Wood Diane Davies  <b>Observing</b> Jeff Brown Natalie Cole</p>	<p>Interim Executive Director Finance Head of Risk Management Interim Executive Director Operations (part meeting via Teams) Associate Director Workforce Planning and Performance Chief Finance Officer East Integrated Health Community (IHC) (item PF24/8 only) IHC Director East (item PF24/8 only) Executive Medical Director (part meeting) Acting Board Secretary (via Teams) Senior Information Governance Manager (Items PF24/15&amp;16 only) Assistant Director Transformation and Improvement (part meeting) Chief Finance Officer East IHC (item PF24/8 only) Executive Director Nursing and Midwifery (part meeting) Corporate Governance Manager– for minutes  Audit Manager – Wales Audit (part meeting) Audit Lead – Wales Audit</p>

Agenda item discussed	Action by
<p><i>The minutes are recorded in the order items were considered due to operational need.</i></p>	
<p><b>PF24/1 Welcome and apologies</b></p> <p><b>PF24/1.1</b> The Chair welcomed attendees to the meeting noting that the meeting had been postponed from the original date of 18 January 2024 to 22 February 2024 due to the potential need for key members to be involved in the response to industrial action.</p> <p><b>PF24/1.2</b> Apologies were received from the Executive Director Transformation and Strategic Planning, Executive Director Nursing and Midwifery, Deputy Director People Services, Chief Digital &amp; Information Officer and Assistant Director Compliance and Business Management – Digital, Data and Technology (DDAT) for whom deputies attended.</p>	

<p><b>PF24/2 Declarations of Interest</b></p> <p>None were received.</p>	
<p><b>PF24/3 Draft minutes of the previous meetings held on 2.11.23 for approval</b></p> <p>The Committee approved the draft minutes of its meeting held on 2.11.23.</p>	
<p><b>PF24/4 Matters arising and table of actions</b></p> <p><b>PF24/4.1</b> In respect of matters arising, it was noted that the Committee was disappointed not to receive a draft Integrated Medium Term Plan for discussion as advised at the November 2023 meeting.</p> <p><b>PF24/4.2</b> The table of actions was <b>accepted</b> and verbal updates <b>noted</b>.</p>	
<p><b>STRATEGIC ITEMS</b></p>	
<p><b>PF24/5 Special Measures report</b></p> <p><b>PF24/5.1</b> The Assistant Director of Transformation and Improvement presented the item. He drew attention to the progress outlined within the report, highlighting the red actions which the Executive Team were actively reviewing and taking action to move forward. It was noted that the Planning and Contract &amp; Procurement Independent Reviews would be scheduled through PFIGC for scrutiny, prior to submission to the Board.</p> <p><b>PF24/5.2</b> In response to the Committee’s questions, the Assistant Director of Transformation and Improvement clarified that future Special Measures reporting would be subsumed into the organisation’s Annual Plan and be clearly identifiable within future quarterly Annual Plan monitoring reports. He understood the Committee’s concern with differentiating those actions whose delivery was impeded due to factors outside BCU’s control.</p> <p><b>PF24/5.3</b> As it was noted that the Interim Executive Director of Operations would shortly be leaving the organisation, the Committee’s concern that assigned actions would be monitored effectively were noted. The Interim Executive Director of Finance outlined the value and sustainability workstreams and monitoring processes being discussed at Executive Team on 28<sup>th</sup> February. These would ensure clarity for all Divisions and Departments on their delivery and savings targets from the outset of the financial year. He gave assurance that some progress was already being achieved within some areas. The Committee emphasised the need for longer term changes to be implemented immediately in order to improve BCU’s position.</p> <p><b>It was resolved that the Committee</b></p>	

<p><b>noted</b> the report</p>	
<p><b>PF24/6 Integrated Medium Term Plan (2024/27) process and Q3 Annual Plan Monitoring Update (2023/24)</b></p> <p><b>PF24/6.1</b> The Assistant Director of Transformation and Improvement presented the item. He advised that in regard to the Special Measures Planning Review a report had been issued in draft form by Welsh Government for accuracy on the 26th January, which the Health Board would comment on by 9th February 2024. He advised the main themes identified were issues around BCU's strategic route map, planning system and also organisational planning &amp; capability. He also set out areas which required agreement in order to develop the annual plan in the context of a 3 year setting ie ensuring timeliness, financial clarity, strategic direction and plan format. It was noted that whilst work had been progressed, Unscheduled Care and Planned Care remained outstanding. It was understood that a Board Development session scheduled on 7<sup>th</sup> March would be provided with an updated position.</p> <p><b>PF24/6.2</b> A discussion ensued on concern with the governance timetabling of the draft annual plan through PFIGC and the Health Board prior to Welsh Government submission. The Committee raised deep concern that the submission preparation had not followed the timetable as set out at the beginning of the financial year. The Committee was uncomfortable that there would be insufficient time for appropriate scrutiny and sought guidance from the Board Secretary on how BCU's committees ie PFIGC or Planning, Population Health and Partnerships Committee (PPHPC) were delegated responsibility for development and monitoring of BCU's annual plan. The Committee Chair requested that these issues be addressed and clarified within a future Board Development Session.</p> <p><b>It was resolved that</b> the Committee <b>noted</b> the progress to date and acknowledged areas of challenge.</p>	<p>PM</p>
<p><b>PF24/7 Annual Financial Plan</b></p> <p><b>PF24/7.1</b> The Interim Executive Director of Finance provided a verbal update to the Committee on the development of the financial plan, referring to the positive allocation received by NHS Wales of 3.67% with very few other government departments in receipt of an increased allocation over previous financial years. He then referred members to the presentation of the financial modelling to the wider Health Board: work to date suggested it would require delivery of a £70m savings target to attain the first key duty of break-even in 2024/25 (a 3.5% ask compared to WG requirement for savings of at least 2%). The new model for savings achievement was critical to delivery of the plan, aligning to the Wales Value &amp; Sustainability workstreams of Non-Pay, Medicines Management, Continuing Healthcare, Clinical Variation and Workforce. This would, require time to embed and identify the opportunities and further articulate plans for implementation and realisation of all benefits, but, if</p>	

<p>achieved, would be a model for sustainable delivery of high quality health services: it was not just about achievement of financial plans.</p> <p><b>PF24/7.2</b> The Plan submission articulated a real challenge in attainment of the key financial duties. The Accountable Officer statement submitted to Welsh Government on the 16th February 2024 indicated the Health Board would not be in a position to submit a compliant IMTP (medium term plan) to cover the next three financial years, and owing to the work required in formation of BCU’s savings plans referred to earlier, and faced a serious challenge with regard to submitting a balanced financial plan for 2024/25. The Interim Executive Director of Finance further indicated a deficit plan could be submitted that aligned to a similar outturn to the deficit control total for 2023/24 of £20m, noting that all Health Boards in Wales had indicated significant and consistent levels of financial challenge continuing into the 2024/25 financial year.</p> <p><b>PF24/7.3</b> The Interim Executive Director of Finance further referenced the size of the challenge from limited capital resources for the 2024/25 financial year. Although high-risk areas were being prioritised, he made members aware that the funds would not be sufficient to mitigate all risks and a strategy to manage these risks would be required as the Health Board moved forward.</p> <p><b>It was resolved that the Committee noted the verbal update.</b></p>	
<b>MONITORING EXISTING STRATEGIES OR PLANS</b>	
<p><b>PF24/8 East Integrated Healthcare Community (IHC) Finance, Performance &amp; Workforce Report</b></p> <p><b>PF24/8.1</b> The IHC Director East and Chief Finance Officers East joined the meeting via Teams to present their report. The IHC Director East set out that the IHC operated on a budget of £349m to support 45% of BCU’s population. She advised of the overspend position, unfunded posts, nurse staffing act position, aseptic service provision and highlighted cost pressures within cancer services (particularly chemotherapy funding issues). The IHC Director East also reported good performance in provision of the prison health care service which was now fully funded. In regard to the financial position, she reported good engagement across the community and with Executives noting that patient safety was also duly considered. In regard to issues, she highlighted that cultural spending habits needed to be addressed and outlined the capacity and demand problems emanating from the high level of acute hospital admissions and the reasons for delayed transfers of care which were beyond BCU’s control.</p> <p><b>PF24/8.2</b> The Executive Director of Nursing and Midwifery commended the very positive improvements in regard to nursing vacancies. A number of questions were raised by the Committee. The Executive Director of Finance concurred that financial cultural issues required responsibility and accountability to be embedded across BCU’s operations and services, he undertook to feed this into the Sustainability</p>	

<p>workstream to address. He also explained the support that would be provided to the IHC through the Executive Delivery Group in order to bring the current overspend more in line with the budget.</p> <p><b>PF24/8.3</b> The Interim Executive Director Operations highlighted the significant risk emanating from Delayed Transfers of Care being experienced and stated that national targetted work was being done to address multifaceted issues.</p> <p><b>PF24/8.4</b> A discussion ensued on the cost effectiveness and business model of Managed Practices and it was noted that NHS Wales Health Board Vice Chairs were looking to explore this area further.</p> <p><b>PF24/8.5</b> The Committee was advised that the appropriate Executives would address outside the meeting unfunded consultant posts and personal development issues raised within the discussion. The Committee was pleased to hear of examples of good practice and transformation provided by the IHC Director East, including Delayed Transfers of Care (DTC) innovations, the use of Getting It Right First Time (GIRFT) and effectively analysing benefit realisation of pilot schemes.</p> <p><b>It was resolved that the Committee reviewed</b> the contents of the report</p>	
<p><b>PF24/10 Special Measures: Financial Improvement action plan update</b></p> <p>The Interim Executive Director of Finance presented the report highlighting the progress made in addressing the outstanding recommendations in particular the engagement with the Procurement Review, revision to the Standing Financial Instructions, restrengthened reporting to BCU's Audit Committee and an improved contract database. It was noted that further work with the Shared Services Procurement department needed to be moved forward in partnership. Action tracking would be undertaken via BCU's Audit Committee.</p> <p><b>It was resolved that the Committee received and noted</b> the Action Plan as at 9 February 2024</p>	
<p><b>PF24/9 2023-24 Month 10 Finance, Capital and Savings Report</b></p> <p><b>PF24/9.1</b> The Executive Director of Finance presented the report providing a briefing on the financial performance of the Health Board as at the end of January 2024. The update included reference to the forecast outturn for the financial year to 31st March 2024, to include risk to delivery, mitigations in place and progress on savings. In addition, the report included an update on delivery of the approved capital programme.</p> <p><b>PF24/9.2</b> The Committee noted that the Health Board's original financial plan deficit had been revised down from £134.1m to £33.0m as a result of additional funding totalling £101.1m following the Welsh Government Budgetary Review.</p>	

<p><b>PF24/9.3</b> The Health Board also received notification from Welsh Government it should improve the deficit plan from the original £134.1m by 10%, the result being an outturn control total of a £20m deficit for the financial year. The Committee noted that the Health Board forecast outturn for 2023/24 had been adjusted down to £33.0m but on current plans would not achieve the £20m control total: this posed risks in terms of future allocations from the Welsh Government.</p> <p><b>PF24/9.4</b> The Health Board had received substantial resources non-recurrently, funding conditionally recurrent on moving towards the control total. As the forecast did not at that time achieve the control total, additional allocations were reflected non-recurrently within Health Board’s position and shared.</p> <p><b>PF24/9.5</b> The Committee noted that the Health Board was in active dialogue in seeking to secure the allocations recurrently, with the delivery of financial control target supporting retention of elements of those funds and significantly improving the allocation received by Health Board.</p> <p><b>PF24/9.6</b> In relation to in year financial performance, the year to date overspend compared to plan had decreased incrementally from c£5m adverse per month to a surplus in December and January.</p> <p><b>PF24/9.7</b> A discussion ensued which included frustration over recruitment controls, redeployment and recharging potential, and other areas of establishment control. It was acknowledged that significant work was being undertaken in this area.</p> <p><b>It was resolved that the Committee</b></p> <p><b>received</b> and had scrutinised the report</p> <p><b>noted</b> the additional capital allocations received to date</p>	
<p><b>PF24/13 Integrated Performance report</b></p> <p><b>PF24/13.1</b> The Interim Executive Director of Operations highlighted deteriorating waiting times in Planned Care including Vascular, Urology, Dermatology, Orthopaedics and Orthodontics. However, significant reductions were being reported in regard to very long waiters. It was noted that the eradication of very long waits for patients was a ministerial priority. Whilst BCU was providing quickest times for cancer patients in Wales, it was not within the targets set by Welsh Government.</p> <p><b>PF24/13.2</b> The Industrial Action undertaken had unfortunately resulted in many patient appointments and procedures being cancelled. Updates were also noted in regard to follow up appointments, significant Delayed Transfers of Care and the continuing challenges of presentations at BCU’s Emergency Departments (EDs). A discussion ensued on ED programme work and shorter waiting times at Minor Injury Units. The Committee requested that the Urgent Primary Care Review be moved forward at pace. In response to the Committee’s query regarding Children and Adolescent</p>	

<p>Mental Health Services (CAMHS) performance, the Interim Executive Director of Operations advised that work had been undertaken to resolve some issues which would lead to improvements.</p> <p><b>PF24/13.4</b> The Interim Executive Director of Finance took on board comments on the formatting and coversheet, which he undertook to address within future reporting.</p> <p><b>It was resolved that</b> the Committee <b>noted</b> the contents of the report</p>	
<p><b>PF24/15 Information Governance Quarter 2 KPI report</b> [Lisa Parry Senior Information Governance Manager (West) joined the meeting]</p> <p><b>PF24/15.1</b> The Senior IG Manager (West) highlighted progress with Freedom of Information requests and the introduction of the new processing system, mandatory training compliance and data protection challenges.</p> <p><b>PF24/15.2</b> A discussion ensued on the issues reported around Access to Health Records (ATHR) and the associated risks. The Committee requested that the next report provide more insight into this area. The Chief Digital and Information Officer pointed out that it was important to understand the resource availability in assessing the risk highlighting also the benefits of electronic record keeping.</p> <p><b>It was resolved that</b> the Committee <b>received</b> assurance on compliance with the Data Protection and Freedom of Information Legislation</p>	
<p><b>PF24/16 External Review of Information Governance and Corporate Records Management</b></p> <p>The Senior IG Manager (West) drew attention to the progress made, noting that only 8 actions remained outstanding.</p> <p><b>It was resolved that</b> the Committee <b>noted</b> the content and risks identified in the report; <b>noted</b> the assurance provided within the report in relation to information governance practice, standards and legislation; <b>noted</b> the executive decision to house the Corporate Records Management Service within the Digital Data and Technology corporate function and implement Option 2 to scope out the next steps required for incremental improvements across the Health Board.</p> <p><i>Paolo Tardivel left the meeting</i></p>	
<p><i>The Committee moved to private session to accommodate the need for an officer to be present, and then returned to public session.</i></p>	

<p><i>The Executive Director of Nursing and Midwifery left the meeting</i></p>	
<p><b>PF24/11 Focus report: NHS Workforce Data Comparison Management Response Report</b></p> <p>The Associate Director Workforce Planning and Performance presented the report which outlined workforce data compared to the national position, including outliers, following an audit report provided to the organisation in early 2023. Of note was the significant number of nursing vacancies which was being addressed in part by health care support worker development. Committee member Prof Larvin highlighted that Medical and Dental staff vacancies were significantly less than the rest of Wales. The increase in 8c posts was concerning and would be considered as part of the operating model review.</p> <p><b>It was resolved that the Committee noted</b> the current position</p>	
<p><b>PF24/12 People performance report</b></p> <p><b>PF24/12.1</b> The Associate Director Workforce Planning and Performance presented the report which outlined the current workforce performance position as of January 2023, an update on the current position of Non-Clinical Senior Interims aligned to delivery of savings, and Recruitment Key Performance Indicators (KPIs). He advised of a developing tripartite working group which was mapping the processes involved in the staff journey to establish improvements and work to improve the integration of workforce and financial data. It was noted that, in response to a previously agreed action, a specific vacancy overview of Clinical Psychology and an in depth report on staff absence had been provided.</p> <p><i>The Executive Medical Director left the meeting.</i></p> <p><b>PF24/12.2</b> Discussion ensued on issues arising through the recruitment of non-funded and new posts and also why there had been lower performance post covid, despite additional posts being introduced. There was also concern in regard to supporting staff absence, especially in areas of stress and anxiety.</p> <p><b>PF24/12.3</b> The Interim Executive Director of Finance echoed the concerns raised and undertook to monitor and address the issues through the value and sustainability workstreams. The Committee questioned whether these issues could also be raised through the People and Culture Committee.</p> <p><b>PF24/12.4</b> In conclusion, the Committee felt it was important to move away from an assumption that the solution to all problems was to recruit more staff, with a stronger focus on the rationale for any new posts proposed.</p> <p><b>It was resolved that the Committee noted</b> the current performance position.</p>	

<p><b>PF24/14 Shared Service Partnership performance assurance report</b></p> <p><b>PF24/14.1</b> The Committee noted the actions being undertaken to address off target performance (94.3%) in relation to the Public Sector Payment Policy target of 95%, which had improved to 95.2% in quarter 3. It was understood that shortlisting delays were being addressed within BCUHB to improve the recruitment position.</p> <p><b>PF24/14.2</b> The Committee acknowledged the Key Performance Indicators provided however, it sought to enter into discussion with NWSSP to consider an outline of additional reporting which would be useful to BCUHB. This would be considered at a future meeting with NWSSP officers present.</p> <p><b>It was resolved that the Committee noted</b> this report.</p>	RC
<b>GOVERNANCE AND RISK</b>	
<p><b>PF24/17 Board Assurance Framework (BAF) (aligned to Committee)</b></p> <p>The Head of Risk Management presented the report. It was noted that risks associated with digital were reducing somewhat, and that those with regard to Estates were in development. It was acknowledged that the Framework was undergoing transition and that it would be necessary for the BAF, Corporate Risk Register and Strategic Objectives to be utilised as an active tool that would help the Board. However, this would require cultural change in regard to engagement and ownership to be effective. The Interim Executive Director of Finance also stated its importance as a tool in relation to performance reviews and that effective triangulation would drive actions and improvements to patient care. It would be important for Executives to consider the high rating assessments of some of the risks.</p> <p><b>It was resolved that the Committee noted and received assurance</b> on the management of the two BAF risks which it oversees</p> <p><b>noted</b> that work was underway with Executive Risk owners for the development of risks SP4 Urgent and Emergency Care and SP14 Estates and Capital, with an agreed deadline of 28 February 2024.</p>	
<p><b>PF24/18 Corporate Risk Register (aligned to Committee)</b></p> <p>The Head of Risk Management presented the current assessments and drew particular attention to comments during the meeting on risks associated with record keeping, mental health services, managed practices and urgent &amp; emergency care.</p> <p><b>It was resolved that the Committee noted</b> the update of two corporate risks and work underway to update three corporate risks which the Committee oversees.</p>	

<b>FOR INFORMATION</b>	
<p><b>PPF24/19 Chair Assurance reports: Transformation &amp; Strategic Planning EDG 15.2.24 &amp; 5.12.23</b></p> <p>It was resolved that the Committee noted the reports</p>	
<p><b>PF24/20 Committee Terms of Reference and Cycle of Business 2024/25</b></p> <p>It was resolved that the Committee noted the reports</p>	
<p><b>PF24/21 Summary of private business to be reported in public - for information</b></p> <p>It was resolved that the Committee noted the reports</p>	
<b>CLOSING BUSINESS</b>	
<p><b>PF24/22 Review of risks highlighted in the meeting for referral to Risk Management Group</b></p> <p>Considered in PF24/18.</p>	
<p><b>PF24/23 Agree items for Chair's Assurance report to Board</b></p> <p>The Committee</p> <ul style="list-style-type: none"> <li>was concerned about the delays in preparation of the Annual Plan against the original timetable outlined.</li> <li>was reassured, however, that it would have an opportunity to discuss the Plan in draft</li> <li>welcomed significant progress on delivering savings within the current year, while noting that the means by which these had been delivered were not sustainable in the longer term if the Board is serious in its commitment to empowering staff at all levels to manage resources appropriately</li> <li>sought to explore the robustness of the establishment control process against budgets, given the evidence of a significant increase in the establishment in the current year and questioned whether this should be discussed further at the People and Culture (PC) Committee</li> <li>welcomed a discussion with senior leaders from the East Integrated Health Community who had presented their Finance and Performance reports; welcomed their open-ness about the many challenges with regard to financial management and performance; and noted the request from them in regard to greater support for transformation and financial management</li> <li>sought further information on the lack of progress in addressing the decreasing compliance with Access to Health Records</li> </ul>	
<p><b>PF24/24 Date of next meetings (in public)</b></p> <ul style="list-style-type: none"> <li>21.3.24 PFIG Committee 9.30-10.30 (Plan)</li> <li>30.4.23 PFIG Committee 9.30-12.30</li> </ul>	