



**Minutes of the meeting of the
Performance, Finance and Information Governance Committee
held in public on 23.2.23 via Teams**

Present: John Cunliffe Richard Micklewright Linda Tomos	Independent Member / Committee Chair Independent Member Independent Member
Neil Bradshaw Jason Brannan Barbara Cummings Geraint Farr Nikki Ffoulkes Nick Graham Ian Howard Carole Johnstone Mandy Jones Nick Lyons Phil Meakin Hugh Mullen Phil Orwin Andy Oxby Dylan Roberts David Seabrooke Chris Stockport Steve Webster Diane Davies Observing Fflur Evans	Assistant Director – Capital (Items PF23/30,31,32) Deputy Director People Interim Performance Director (Items PF23/35&37) Acting Associate Director for Emergency Care (Item PF23/39) Interim Outsourcing and Insourcing Manager (Item PF23/38) Associate Director Workforce - Planning and Performance (part meeting) Assistant Director Strategic and Business Analysis (Items PF23/32&33) Head of Information Governance (Item PF23/40) Deputy Director Nursing and Midwifery Executive Medical Director (part meeting) Associate Director of Governance Interim RTC Programme Director (Item PF23/38.1) Interim Regional Delivery Director (part meeting) Interim Outpatient Programme Support Manager (Item PF23/38) Chief Digital and Information Officer (part meeting) Interim Assistant Director Governance (Items PF23/19 and PF23/41) Executive Director Planning and Transformation Interim Executive Director Finance Corporate Governance Manager / Committee Secretariat Wales Audit

Agenda Item Discussed	Action By
PF23/18 Apologies and Declarations of Interest Apologies were received on behalf of Sue Green for whom Jason Brannan and Nick Graham deputised, Justine Parry for whom Carole Johnstone deputised for item PF23/40, Angela Wood for whom Mandy Jones deputised, Dave Harries Internal Audit, Andrew Doughton Finance Lead, Wales Audit and Michelle Phoenix Performance Lead, Wales Audit. No declarations of interest were received.	
PF23/19 Review of Performance, Finance and Information Governance Committee Terms of Reference and delegated authority PF23/19.1 The Interim Assistant Director of Corporate Governance joined the meeting to present this tabled item. It was noted that the Health Board had agreed	

<p>a change to BCUHB Scheme of Reservation and Delegation (SORD) at its meeting on 30 March 2022 which delegated authority to approve business cases to the value of up to £1million to the Performance, Finance and Information Governance Committee. He advised insertion of an additional row in the SORD referencing PFIGC delegated approval ceiling of up to £1m for Business Cases.</p> <p>PF23/19.2 In the discussion which followed the Interim Executive Director of Finance pointed out that a higher and lower figure should be incorporated within the PFIGC SORD insertion for clarity ie £0.5m to £1m as his role was delegated approval up to £0.5m.</p> <p>PF23/19.3 The Associate Workforce Director questioned whether the figure related to business cases only.</p> <p>PF23/19.4 The Committee directed that the references to 'evidence based' be retained within the Terms of Reference, however the remaining amendments were agreed as outlined.</p> <p>It was resolved that the Committee agreed to</p> <ul style="list-style-type: none"> • recommend to the Audit Committee that actions are undertaken to amend the latest version of the SORD and Standing orders as delegated by the Board • approve the TOR for submission to the Audit Committee subject to the amendments outlined within the discussion 	DS for MM
<p>PF23/20 Draft minutes of the previous PFIG Committee meeting held on 19.1.23</p> <p>The minutes of the meeting were approved.</p>	
<p>PF23/21 Matters arising and table of actions</p> <p>The table of actions was updated and closed actions agreed.</p>	
<p>PF23/22 Report of the Chair</p> <p>None reported</p>	
<p>PF23/23 Report of the Lead Executive</p> <p>PF23/23.1 The Committee welcomed the written report. The Interim Executive Director Finance advised that further information would be shared with the Committee in due course in regard to the review work which had been undertaken which had significant implications.</p> <p>PF23/23.2 In response to the Committee's questioning of whether the previous 'modus operandi' was flawed, he advised that there were issues in processes</p>	

<p>involving commitment to new expenditure. However, this had been rectified going forward and he was now fully sighted on 95% of the historical commitments..</p> <p>PF23/23.3 In response to the Committee, the Interim Executive Director Finance advised that whilst an interim appointment had been made of a suitably qualified applicant to fill the combined role of the departing Director of Estates and Assistant Director Capital, the permanent position was in the process of being recruited.</p> <p>It was resolved that the Committee noted the report</p>	
<p>PF23/24 Notification of matters referred from other Board Committees on this or future agendas</p> <p>None advised</p>	
<p>PF23/25 Finance reports Months 9 and 10</p> <p>PF23/25.1 The Interim Executive Director Finance highlighted the recovery plan, advising that current recurrent spending rates were not reducing materially; and that instead more slippage was being experienced along with some release from the balance sheet. He drew attention to potential issues with the forecast and WG resource. He stated that it could be possible to meet the 3 year breakeven position however this could affect the finances in the next year. WG would be setting out the position in regard to potential more in year allocation. Therefore a decision would be considered shortly on whether to reduce the forecast deficit and potentially change to a breakeven forecast.</p> <p>PF23/25.2 The Committee questioned the consistency of Covid/Unscheduled care funding from WG in comparison with other health boards. The Interim Executive Director of Finance advised that the costs attributable to Covid/USC would be reported more consistently in line with other Health Boards in presenting the recurrent 2022/23 deficit, but this would not change the 2022/23 WG Covid funding other than in relation to the £4.3m additional funding agreed by WG.</p> <p>PF23/25.3 In response to the Committee, the Interim Executive Director of Finance agreed to provide the rationale on why key risks had been de-escalated between month 8 and 9, as the Committee Chair perceived these to have been those which required most attention. Following a point made by the Committee Chair, the Director of Governance undertook to clarify whether properties were increasing or decreasing in respect of data provided on page 15 and to also confirm that an overarching risk was on the current Corporate Risk Register (CRR).</p> <p>PF23/25.4 The Committee questioned how Pay Vs Vacancy work was being progressed, with particular concern on the reliance of agency staffing and what approach was being undertaken to resolve the issue. The Interim Executive Director of Finance reflected that a large driver to appoint staff was the impact on safety as well as cost, he also cited the need for executive sponsorship to work through divisional issues, need for disinvestment discussions and Nurse Staffing Act requirements. The Deputy Director of People stated that the newly introduced</p>	<p>SW</p> <p>PM</p>

<p>operating model provided greater local decision making and accountability. He also cited optimisation work, additional interim controls and referred the Committee to the supporting paper of PF23/29 Agency Controls report. The Executive Medical Director emphasised the importance of addressing quality and finance hand in hand, emphasising the importance of local accountability given that medical agency was now high cost and high volume usage.</p> <p>PF23/25.5 In response to the Committee, the Interim Executive Director of Finance advised that anticipated WG support had not been factored into the cash flow forecasts presenting in the Month 8 report as it has not been agreed at that stage by WG, resulting in the large cash shortfall shown in the M8 report. This ought to have been made clearer in the report.</p> <p>PF23/25.6 In response to the Committee, the Interim Executive Director of Finance advised that the Savings pipeline needed to be resurrected to focus on longer term strategic programmes and away from short term non-recurrent schemes.</p> <p>PF23/25.7 It was agreed that the plan to schedule Divisional officers reporting on their progress would be resurrected and included in the 2023/24 Cycle of Business at each meeting.</p> <p>It was resolved that the Committee noted the reports</p>	SW (DD)
<p>PF23/26 Savings Delivery report</p> <p>PF23/26.1 The Interim Executive Director of Finance advised current savings delivery was static and that, following further discussion with the Deputy Director People, the position would be clarified on when VERS savings would be included in the report. The Committee was very concerned with the lack of process. The Interim Executive Director of Finance emphasised the requirement to make improvements moving forward into the next financial year.</p> <p>PF23/26.2 Following concerns raised by the Committee a discussion ensued on the effectiveness of the Savings programme, especially in regard to the level of specificity provided. The Interim Executive Director of Finance undertook to address the feedback provided including validation and benefits realisation moving forward. The Executive Medical Director added that, along with managerially led finances it would be important to ensure clinical teams were contributing and accountable to ensure sustainability, albeit this would be challenging.</p> <p>PF23/26.3 The Interim Regional Delivery Director commented on the need to also support BCU managers with an appropriate level of financial training, as holding to financial account would be challenging.</p> <p>It was resolved that the Committee noted the report</p>	

<p>PF23/27 Delivery of Health Board Savings Internal Audit Report</p> <p>PF23/27.1 The Committee was very concerned with the Internal Audit report which was rated as providing 'no assurance'. The Interim Executive Director of Finance reflected other Health Boards in Wales were in a similar position regarding total savings delivery, however transformational change at BCU would be key.</p> <p>PF23/27.2 The Committee questioned whether another Performance and Accountability (P&A) Framework would provide a solution, as previously introduced frameworks had been ineffective. The Interim Executive Director of Finance advised that the newly appointed Interim Performance Director and the approach to properly implementing the performance and accountability framework would be an important enabler to improving processes.</p> <p>PF23/27.3 The Committee again raised concern as to whether a continuous pipeline of savings delivery was planned in year or, as in previous years, whether plans were scheduled to be delivered towards the end of the financial year. In addition, the deliverability of the management report response in regard to governance and assurance processes was questioned (P13).</p> <p>PF23/27.4 A discussion ensued on strengthening the P&A Framework, delivery support, skills support, budgetary financial consequences of non-delivery and an acknowledgement that transformational schemes had not contained a sufficient level of granularity in order to be deliverable, which had been an important learning point.</p> <p>It was resolved that the Committee noted the report</p>	
<p>PF23/28 Financial control report</p> <p>PF23/28.1 The Interim Executive Director of Finance advised that the recommendations of the End Year report along with those of Internal and External Audit needed to be incorporated within the Financial Control report. Decision making where there are financial consequences also needed to be better understood. A review of decision-making processes around cost pressures or investments resulting in increased expenditure needed to also be incorporated in the plan. The Committee stated that the table within the report could improve assurance through the inclusion of milestones and delivery updates.</p> <p>PF23/28.2 The Interim Executive Director of Finance took onboard the feedback provided and undertook to amend the format of future reports. The Committee requested that the amended report be referred to Audit Committee</p> <p>It was resolved that the Committee noted the report</p>	<p>SW</p> <p>SW/ MM</p>
<p>PF23/29 Agency Controls report</p>	

<p>PF23/29.1 The Associate Workforce Director presented this report, he highlighted the controls process in place, need for improvements in compliance, support required to assist staff and improvement required in unit costs.</p> <p>PF23/29.2 The Committee acknowledged that the report provided assurance on the process however it questioned whether the report provided sufficient compliance detail. It was noted that the Deputy Director People undertook to provide the necessary information, which also aligned with the new operating model, within 3 months.</p> <p>PF23/9.3 In the discussion on modernising the workforce it was noted that potential savings and improved sustainability would result following the introduction of alternative appropriately trained roles.</p> <p>It was resolved that the Committee noted</p> <ul style="list-style-type: none"> the current controls outlined in the report the intention to review and amend future reports as outlined within the discussion 	JB
<p>PF23/30 Capital Programme Monitoring reports Months 8 and 9</p> <p>PF23/30.1 The Assistant Director – Capital presented the report. He advised confidence in meeting the Capital Resource Limit (CRL), all orders had been placed with appropriate delivery times. It was noted that there remained the ability to manage slippage.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> noted and scrutinised the report supported the proposed adjustments to the capital programme 	
<p>PF23/31 Draft Capital Programme 2023 - 2028</p> <p>PF23/31.1 The Assistant Director – Capital presented the report, highlighting that WG had confirmed that there would be a separate funding allocation in support of “Targeted Improvements in the NHS Estate in Wales” (Estates and Facilities Advisory Board (EFAB) Programme) in 2023/24 and 2024/25. BCU had approved £4.324m funding for 2023/24. Health Boards were required to provide 30% support from their discretionary allocation, for BCU this equated to £1.297m for 2023/24.</p> <p>PF23/31.2 He also drew attention to the 25% overcommitment made and that there were ‘ready to go’ schemes available to slot into the final quarter which the Capital Improvement Group had prioritised based on risk and need.</p> <p>PF23/31.3 The Committee raised concern regarding fire compliance in BCU’s estate. The Assistant Director - Capital stated that the report provided further detail however prioritisation had taken place. It was acknowledged that BCU’s</p>	

<p>resources were not sufficient, however the organisation manage its capital expenditure within the available resources overall..</p> <p>It was resolved that the Committee supported the draft programme for submission to the Health Board for formal approval</p>	
<p>PF23/32 Wrexham Maelor Hospital Continuity Programme Full Business Case (FBC)</p> <p>PF23/32.1 The Assistant Director –Capital advised the business case to be a priority of BCU’s recently agreed Estate Strategy which would be funded by WG at a cost of £54.2m plus inflation, albeit that volatilities in the energy market might impact. He also drew attention to the report statement that any provision for additional inflation risk should be held within the client contingency not the Supply Chain Partner in order to avoid unwarranted gain share.</p> <p>PF23/32.2 In response to the Committee, the Assistant Director – Planning stated that no adverse impact was anticipated with the same company providing the services of Project Manager and Cost Advisor, as the company had provided the best tenders and this situation was also reflected in others across Wales.</p> <p>PF23/32.3 The Committee acknowledged the long service and contribution that the Assistant Director –Capital had provided with BCUHB and predecessors and wished him well in retirement.</p> <p>It was resolved that the Committee supported the business case for subsequent approval by the Health Board.</p>	
<p>PF23/33 Business Case Tracker</p> <p>PF23/33.1 The Committee pointed out that the progress of the Long Covid Business Case would need to be updated on the tracker. The Committee Chair requested a meeting with the Interim Executive Director of Finance to discuss a more effective format that the Committee required.</p> <p>PF23/33.2 The Interim Executive Director of Finance also undertook to discuss prior scrutiny of future report submissions via the Executive Team with the Assistant Director Strategic and Business Analysis following the meeting.</p> <p>It was resolved that the Committee noted the update</p>	<p>SW</p> <p>SW</p>
<p>PF23/34 Transformation and Improvement update</p> <p>PF23/34.1 The Executive Director of Transformation and Planning drew attention to the stepped activity taking place with Improvement Wales, and that prioritisation was taking place to deal with those which would deliver most quickly. The 6 goal process was highlighted including improved engagement and methodology.</p>	

<p>PF23/34.2 The Committee questioned how the new reporting formats would be linked with financial reports, which the Executive Director of Transformation and Planning advised was being explored with the Interim Executive Director of Finance. It was suggested that the beneficial impacts on finance would be useful to be included within future updates.</p> <p>PF23/34.3 The Committee Chair stated it would be important demonstrate that public monies were being utilised in an effective manner in regard to project management tools. The Interim Executive Director of Finance concurred that investments in programme management should be demonstrated alongside the benefits delivered. It was noted that the Executive Medical Director advised that executives were considering how to demonstrate consistency in regard to Targetted Intervention and the Corporate Risk Register.</p> <p>It was resolved that the Committee received the report and noted the areas of progress</p>	
<p>PF23/35 Operational Plan Monitoring report (OPMR)</p> <p>PF23/35.1 The Executive Director of Transformation and Planning introduced the item. It was noted that a meeting had taken place with the Committee Chair to inform future report formatting to be introduced in the new financial year. He advised the development to be on track for delivery.</p> <p>PF23/35.2 The Interim Director of Performance was welcomed to her first meeting. In response to the Committee's concern with 50% lack of data submission, she perceived that there was a systemic lack of engagement with the process. Following discussion, the Executive Director of Transformation and Planning advised an updated report would be provided to the next meeting.</p> <p>It was resolved that the Committee noted the report</p>	
<p>PF23/36 People Performance report</p> <p>PF23/36.1 The Associate Workforce Director Performance and Planning introduced the report. He highlighted no significant additional use of agency staffing, recruitment improvements with the exception of medical and nursing, improved grip on recruitment and progression with optimisation work.</p> <p>PF23/36.2 The Committee welcomed the increased level of detail provided however, narrative was needed regarding the 3 year plan moving forward to ensure a more strategic view. The Associate Workforce Director Performance and Planning undertook to take the feedback provided forward including provision of community nurse staffing detail and age profiling, which could assist in recruitment forecasting. The Interim Executive Finance Director was concerned with the potential £10m cost of compliance with the nurse staffing levels (NSLs), he stressed the importance of ensuring alignment with BCU's finances – the</p>	

<p>Committee Chair pointed out that this issue had previously been raised by the Committee when NSLs were introduced.</p> <p>PF23/36.3 The Deputy People Director advised that the next Partnerships, People and Population Health Committee was scheduled to receive an update on BCUHB's People Strategy.</p> <p>PF23/36.4 The Executive Medical Director requested that the covering template be amended to indicate that the report did not provide detail on Dentistry, Community Pharmacy or Independent Contractors.</p> <p>PF23/36.5 The Interim Regional Delivery Director reflected on the utilisation of interims for 'difficult to fill' roles, especially senior operational managers, a discussion ensued on the use of substantive and temporary appointments.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> noted the current performance position considered and provided feedback on content for future reporting 	NG
<p>PF23/37 Integrated Quality and Performance report</p> <p>PF23/37.1 The Interim Performance Director presented the report highlighting performance in planned, unscheduled care and also cancer services. It was noted that Primary Care performance would be included within the next report.</p> <p>PF23/37.2 A discussion ensued on the importance of providing clarity on issues arising and mitigations that were in place to address them, especially in regard to scale.</p> <p>PF23/37.3 It was agreed that Committee members would discuss the Committee's reporting needs in regard to Planned and Unscheduled Care outside the meeting</p> <p>It was resolved that the Committee scrutinised the report</p>	JC/RM/LT
<p><i>This item was taken out of sequence to assist operational need</i></p> <p>PF23/39 Unscheduled Care report</p> <p>PF23/39.1 The Executive Medical Director highlighted the improvements which had taken place whilst industrial action had taken place, including 15 minute ambulance handovers of patients. The Acting Associate Director Emergency Care (ED) reported that BCU had maintained the WG performance target during the winter period, he highlighted the advantages gained through the inclusivity of Primary Care colleagues. He also reported on a reflective learning event that had taken place.</p>	

<p>PF23/39.2 The Committee welcomed the improved reporting provided. In response to the Committee, the Acting Associate Director ED provided further detail on the Airdale model introduction on goal 2 – Signposting.</p> <p>It was resolved that the Committee noted the update on Unscheduled Care performance and partial assurance provided from actions to deliver to national targets</p>	
<p>PF23/38 Planned Care (PC) update The Interim Outsourcing and Insourcing Manager and Interim Outpatient Programme Support Manager joined the Interim Regional Delivery Delivery Director in supporting this item. A brief summary was provided on the report provided. It was noted that had industrial action not taken place the outpatient programme would have overdelivered on the target set.</p> <p>It was resolved that the Committee noted the partial assurance of the PC programme</p>	
<p>PF23/38.1 Planned Care : Regional Treatment Centre (RTC) update</p> <p>PF23/38.1.1 The Interim RTC Programme Director joined the meeting to present this item, he advised that a key workshop would be taking place the following week on how to demonstrate how planned care recovery would take place, which could significantly change RTC plans. The Interim RTC Programme Director drew particular attention to the level of WG financial support required within the report.</p> <p>PF23/38.1.2 The Committee raised a number of questions. The Interim RTC Programme Director advised that should the developing standalone Orthopaedic Hub Business Case based at Llandudno be taken forward this would affect the size of the RTC build. The Interim Executive Director of Finance acknowledged Committee concerns and reported that the Strategic Outline Case had not been approved by WG. BCU's committed spending in relation to design costs to date had been significant and potentially a cost burden given other issues that had arisen. The logic of the development was acknowledged however it was potentially undeliverable within available budgets. The Executive Medical Director also acknowledged that existing theatre utilisation and workforce needed to be considered further and addressed in the upcoming workshop.</p> <p>PF23/38.1.3 The Interim RTC Programme Director advised that the Orthopaedic BC could progress with or without the RTC, as it was his belief that 2 sites would be needed due to workforce requirements and potential evening and weekend working.</p> <p>PF23/38.1.4 The Director of Governance highlighted the financial risk to the organisation and the need to clarify the current RTC risk with potential alternative solutions.</p> <p>It was resolved that the Committee</p>	

<ul style="list-style-type: none"> • noted the content of the report as evidence of work being undertaken to progress the RTC programme • noted work on programme risk reporting • agreed the proposal for a quarterly report to PFIGC on programme progress, finances and risks 	
<p>PF23/40 Information Governance Quarter 2 2022/23 Key Performance Indicators (KPI) Report.</p> <p>PF23/40.1 The Head of Information Governance joined the meeting to present the report. She highlighted the positive news that BCU's overall compliance of mandatory Information Governance training across BCUHB had remained at 83% during quarter 2. The paper had been deferred from the December meeting due to shortening the PFIGC agenda to accommodate operational needs, she advised that progress had since been made on the information governance asset register, compliance, access to health records and the complaints had been closed.</p> <p>PF23/40.2 The Committee questioned the mail box confidentiality issue and reporting controls. It was noted that whilst under reporting was impossible to quantify, all reported incidents were acted upon. She undertook to provide more detail within the next report and was pleased to advise that since the IG department had merged within the DDAT division there had been increased collaborative working in this area.</p> <p>It was resolved that the Committee noted the report, including assurance provided on compliance with the Data Protection and Freedom of Information legislation</p>	
<p>PF23/41 Board Assurance Framework</p> <p>The Interim Assistant Director Corporate Governance presented this item. He agreed to consult with the Interim Board Secretary on whether the Internal Audit Savings report addressed the gaps in CRR 2.7 and, following a query raised by the Interim Executive Director of Finance, to clarify whether the version presented was the most up to date.</p> <p>It was resolved that the Committee noted</p> <ul style="list-style-type: none"> • the BAF risks and their associated mitigations • the three risks that were now outside the risk appetite of the Health Board in relation to unscheduled care, planned care and the delivery of the savings plan 	DS
<p>PF23/42 Corporate Risk Register</p> <p>PF23/42.1 The Committee Chair was disappointed not to receive the CRR. It was noted that plans were in hand to agree submission of the CRR at each meeting based on the proposal that the Risk Management Group would be consolidated within the Health Board Leadership Team. At the HLT meeting held on 15.2.23 it was noted that no new risks had been identified.</p>	

<p>PF23/42.2 The Director of Governance summarised the following risks which had been raised during the meeting:</p> <ul style="list-style-type: none"> • A risk that is on the operational risk register that reflects the Finance paper • A risk that financial overview and performance management may not be optimal which if not addressed will have the impact of worsening the BCUHB financial position • There is a potential risk that Recovery Programmes and other Programmes and Performance related issues are not optimised and this would have an impact on the key objectives of the Health Board due to a potential misunderstanding of clear understanding of accountability • There is a risk that a sub-optimal triangulation of performance information-Transformation-Financial information could have an impact on the ability to provide evidence that we are improving our Targeted Intervention Position and other important Corporate objectives • There is a risk that performance reports are not aligned to requirements of BCUHB. Including the need to align to the TI Performance Maturity Matrix • RTC -There is a risk of revenue pressure as a result of “double running” as we transform and the ability of the workforce to support these requirements. The impact of this could be to destabilise existing services. <p>PF23/42.3 The Director of Governance stated that BCUHB had volunteered to pilot a Risk Management system for potential rollout across Wales. In discussion which followed the need for a risk probability and impact discussion was highlighted along with the need for briefer documentation which also included Health & Safety risks and clinical risks.</p> <p>It was resolved that the Committee noted</p> <ul style="list-style-type: none"> • the verbal update on future CRR reporting • the summary of risks highlighted during the meeting 	
<p>PF23/43 Chair Assurance reports : Executive Delivery Groups and Groups</p> <p>It was resolved that the Committee noted</p> <ul style="list-style-type: none"> • the following Chair assurance reports <p>PF23/43.1 Chair Assurance report : Transformation EDG</p> <p>PF23/43.4 Information Governance Group</p> <ul style="list-style-type: none"> • the intention of the Interim Executive Director of Finance to discuss with the Interim Chief Executive the purpose and requirement of the following Executive Delivery Groups which had not met: <p>PF23/43.2 Finance EDG</p> <p>PF23/43.3 Performance EDG</p>	SW

PF23/44 Agree items for referral to Board / Other Committees Audit Committee - PF23/19 SORD/ToRs and PF23/28 Financial control report	
PF23/45 Review of risks highlighted in the meeting for referral to Risk Management Group See PF23/42 above.	
PF23/46 Agree items for Chairs Assurance report To be agreed outside the meeting	
PF23/47 Review of meeting effectiveness No feedback was provided.	
PF23/48 Summary of private business to be reported in public The Committee noted the report	
PF23/49 Date of next meeting 23.3.23	
Exclusion of Press and Public Resolution to Exclude the Press and Public "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."	