



**Finance & Performance Committee**  
**Minutes of the meeting held in public on 22.8.19**  
**in Carlton Court, St Asaph**

**Present:**

Mr Mark Polin	BCUHB Chairman
Mr John Cunliffe	Independent Member / Committee Vice Chair
Ms Helen Wilkinson	Independent Member
Mr Eifion Jones	Independent Member

**In Attendance:**

Mr Neil Bradshaw	Assistant Director Strategy ~ Capital Planning ( <i>part meeting</i> )
Mr Phillip Burns	Interim Recovery Director
Ms Deborah Carter	Acting Executive Director Nursing and Midwifery
Mr Simon Dean	Deputy Chief Executive, NHS Wales
Mrs Sue Green	Executive Director Workforce and Organisational Development (OD)
Mr Ian Howard	Assistant Director Strategy & Business Analysis ( <i>part meeting</i> )
Mrs Jackie Hughes	Independent Member
Mr Geoff Lang	Head of Value and Savings Programme ( <i>part meeting</i> )
Ms Gillian Milne	Head of Contracts ( <i>part meeting</i> )
Ms Tracy Pope	Interim Head of Contracting ( <i>part meeting</i> )
Mrs Llinos Roberts	Executive Business Manager
Mr Rod Taylor	Director Estates and Facilities ( <i>part meeting</i> )
Mr Tony Uttley	Interim Financial Director – Operational Finance
Mr Mark Wilkinson	Executive Director of Planning & Performance
Ms Emma Wilkins	Deputy Director, Financial Delivery Unit, Welsh Government (WG) ( <i>part meeting</i> )
Ms Diane Davies	Corporate Governance Manager

Agenda Item	Action By
<p><b>FP19/179 Declaration of Interests</b></p> <p>Ms Wilkinson advised that as Chief Officer of Denbighshire Voluntary Services Council, she had an interest in item FP19/187.1 Re-location of Services from Mount Street Clinic, Ruthin – Business Justification Case.</p>	
<p><b>FP19/180 Apologies for absence</b></p> <p>Apologies were provided by Ms Sue Hill, Mr Gary Doherty, Mrs Lyn Meadows, Mr Michael Hearty and Dr David Fearnley.</p>	
<p><b>FP19/181 Draft minutes of the previous meeting held on 29.7.19 and summary action plan</b></p>	

<p><b>FP19/181.1</b> The minutes were approved as an accurate record.</p> <p><b>FP19/181.2</b> Updates were provided to the summary action log. The Acting Executive Director Nursing &amp; Midwifery assured that the Vanguard Unit was on schedule. A further update on Endoscopy services was noted to be discussed within the InCommittee agenda.</p> <p><b>FP19/181.3</b> The Chairman highlighted concerns around breast services and requested that the Acting Executive Director Nursing &amp; Midwifery provide him with a briefing. <i>The Deputy Director, Financial Delivery Unit, WG joined the meeting.</i></p> <p><b>FP19/181.4</b> In relation to FP19/101.4 The Committee discussed the efficacy of action monitoring at Area Finance team meetings and requested that format improvements be addressed. The Interim Recovery Director confirmed that clarity on the East Area savings target would be dealt with through the financial recovery programme.</p> <p><b>FP19/181.5</b> The Interim Financial Director – Operational Finance explained the discrepancy with RTT figures and gave assurance this was being addressed.</p> <p><b>FP19/181.6</b> The Chairman emphasised that in relation to BCU’s developing clinical services strategy, a conversation on Financial Recovery would need to be clearly articulated, including resource where significant tension needed to be addressed. The Deputy Chief Executive NHS Wales commented that a coherent reponse was required with clarity on shaping of services.</p>	<p>DC</p> <p>MW</p>
<p><b>FP19/182 Integrated Quality and Performance report (IQPR)</b></p> <p><b>FP19/182.1</b> The Chairman observed that the modified format of the IQPR had provided the members with an improved ability to monitor quality and performance, however he shared feedback in a number of areas. This included further quality assurance work, examples of effective reporting processes provided by the police service and the need for a collective picture as well as discreet areas. He welcomed feedback from other members</p> <p><b>FP19/182.2</b> Committee feedback included concerns on cut and paste comments to summaries which did not provide a sense of improvement; whilst acknowledging that the new graph format was useful a sense of performance deterioration could not be gained, more attention to narrative detail was required, a need for a more strategic executive summary and prioritisation framework inclusive of performance issues and greater demonstration of successful action plans. The Committee also discussed the density of data and transparency to both public and members, suggesting that an overlaying presentation might be helpful. It was noted that the Independent Financial Advisor had also forwarded comments via the Chairman which included the suggestion that the data rich report was more helpful for the Executive Team whilst other suggested details could provide a more useful report for the Committee.</p>	

<p><b>FP19/182.3</b> A discussion ensued on the possible content of a supporting presentation which needed to include deteriorating performance, actions taken as well as positive progress.</p>	
<p><b>FP19/182.4</b> It was agreed that the Committee would receive a presentation on progress in reformatting the IQPR at the next meeting with a view to receiving a new and effective format at the October meeting.</p>	MW
<p><b>FP19/182.5</b> The Deputy Chief Executive NHS Wales commented that it was important that the organisation was able to demonstrate its current position, where it wished to be, how this would be achieved and by when, whilst also providing context and very importantly, the inclusion of choices (not only actions).</p>	
<p><b>FP19/182.6</b> The Chairman invited the Committee to address the report, reminding that Building Better Care programme and RTT would be addressed later in the meeting as well as Endoscopy services within the InCommittee session. The Executive Director of Planning and Performance highlighted particular concern in relation to planned and unscheduled care with increased waiting lists and noted that whilst there was particular deterioration within the East area, managerial changes had been introduced along with Board decisions taken regarding outsourcing to assist in addressing the issues.</p>	MW
<p><b>FP19/182.7</b> The Chairman requested that the Executive Director of Planning and Performance provide trajectories by specialty/locality on 6 specialty areas which affected RTT within 2 weeks, including details of ownership. A discussion ensued on trajectories and forecasting in which the Deputy Chief Executive NHS Wales emphasised that it was really important that trajectories were not statements of ambition but predicted performance – which would drive choices to be made.</p>	MW
<p><b>FP19/182.8</b> The Chairman requested further detail on why there had been a deterioration in the previous 3 months on planned care measure DFM064 urgent suspected cancer. In respect of RTT, the Committee was assured that the Treat in Turn process changes had resulted in a positive increase in patient scheduling. The Chairman noted there had been a drop in delivering cancer waiting times within 62 days in June 2019.</p>	MW
<p><b>FP19/182.9</b> The Executive Director of Planning and Performance updated the Committee on progress to date with recruitment and other developments in relation to the orthopaedic service business case. It was noted that a further business case was being developed by November 2019 for consideration by WG in respect of further investment.</p>	
<p><b>FP19/182.10</b> Following the Chairman's invitation, the Deputy Director NHS Wales commented that the organisation had received in excess of £49m to make performance improvements over the previous 4 years however, unlike other Health Boards, BCU's position had not improved in respect of RTT and diagnostics. He stressed the need for BCU to provide a sustainable and coherent plan to address improvement, emphasising it was really important</p>	

<p>for the Board to demonstrate its comprehension of the scale of the challenge faced and address underperformance. In respect of the orthopaedic plan it would be necessary to also reflect how the solution to invest would fit within BCU's overall framework. The Acting Executive Director of Planning and Performance was requested to ensure the Committee was updated on progress with the orthopaedic plan.</p>	MW
<p><b>FP19/182.11</b> In respect of Planned Care the Acting Executive Director Nursing and Midwifery advised that a similar form of programme improvement approach would be undertaken as within unscheduled care and provided greater detail of individual elements of the work such as re-profiling and dashboard introduction.</p>	
<p><b>FP19/182.12</b> In response to the Chairman the Executive Director of Planning and Performance advised that a robust business plan would be developed to address ophthalmology. The Deputy Director NHS Wales iterated the need to reflect achievement of a financially sustainable and effective, safe service. He also advised that the Board needed to address low efficiency and provide strategic solutions with choices.</p>	
<p><b>FP19/182.13</b> The Chairman was assured that there was sufficient resource to address RTT by the Executive Director of Workforce and OD and also the Executive Director of Planning and Performance with the possible exception of vacancy vetting work. It was agreed that the narrative in respect of Eye Care Measure would be reworded for improved clarity.</p>	MW
<p><b>FP19/182.14</b> The Acting Executive Director Nursing and Midwifery provided an overview of unscheduled care work being undertaken highlighting a continuing 5% improvement within Out of Hours performance as well as improvements within some areas of stroke services. She drew the Committee's attention to the challenges which had presented in July including 30% increase in ambulance conveyances, staff annual leave and sickness. The Acting Executive Director Nursing and Midwifery also shared issues relating to Ysbyty Glan Clwyd (YGC) ambulance handovers which had been shared with the Delivery Unit. The Chairman affirmed his confidence that the Acting Executive Director Nursing and Midwifery had an in-depth knowledge of the key issues and that they were being addressed.</p>	
<p><b>FP19/182.15</b> The financial balance target was noted as &lt;=£25m. In respect of the Workforce measures the Executive Director of Workforce &amp; OD provided an update on deep dive work undertaken and advised that fast track processes required further work. She also highlighted work in addressing sickness absence supportively and provided confidence that if the systematic approach was followed there would be an improvement in meeting the challenging target. The Executive Director of Workforce &amp; OD agreed to clarify the trajectory and target levels within the graphs provided.</p>	SG
<p><b>It was resolved that the Committee</b></p> <ul style="list-style-type: none"> <li>• noted the report</li> <li>• agreed to develop the IQPR and provide an additional report that included</li> </ul>	

further detail on issues.	
<p><b>FP19/183 Annual Plan 2019/20 : Monitoring of Progress against Actions</b></p> <p><b>FP19/183.1</b> The Committee reviewed the document. A discussion ensued regarding the monitoring of actions which were reported as amber on a long term basis and it was noted that peer challenge and dip sampling would be taking place at the end of quarter 2. The Interim Recovery Director agreed that this should be addressed in order to avoid the potential for ambiguity. The Executive Director of Planning and Performance reminded the Committee that the plan was delivering as forecast and provided assurance that monitoring and challenge were being undertaken by the Executive Team. The Chairman suggested that any issues arising should be highlighted by provision of narrative within the report, particularly for red areas.</p> <p><b>FP19/183.2</b> In reviewing the ‘red’ status actions it was noted that national procurement work being progressed had placed development of BCU’s robotic surgery business case on hold in respect of urology services. The Committee questioned plans in place in respect of Endoscopy services. It was noted that the Executive Director of Therapies and Health Sciences was disaggregating through a systematic review the business cases required to address diagnostic service sustainability. The Executive Director of Workforce and OD undertook to liaise with the Executive Medical Director in order to ascertain progress in developing BCU’s Digital Strategy and provide an update regarding the red status of AP052 (WCCIS learning).</p> <p><b>FP19/183.3</b> A discussion ensued following the suggestion made by the Deputy Chief Executive NHS Wales to consider moulding the monitoring plan with the IQPR and capturing the organisation’s ambition. The Chairman reflected that not all of the plan would have a linear connection to performance and therefore some nuance might be lost. It was agreed that the annual plan monitoring report would be considered before the IQPR within future agendas. The Executive Director of Workforce and OD agreed to clarify the RAG status of AP048 (Integrated workforce development model).</p> <p><b>It was resolved that the Committee noted the report</b></p>	<p>MW</p> <p>SG</p> <p>DD SG</p>
<p><b>FP19/184 Completed Planning Profiles supporting July Board 2019/20 Annual Plan</b></p> <p><b>FP19/184.1</b> The Executive Director of Planning and Performance advised the Committee of the profiling work undertaken highlighting the financial risk involved and also a £2.5m funding gap which he had confidence could be narrowed as explained within the report. He also drew attention to risks both within and outside of BCU’s control. The Executive Director of Planning and Performance emphasised the fundamental cultural change required to adhere to the treating in turn process change. He clarified the blended solutions which were alluded to within the report and undertook to confirm figures provided within the tables provided following a query being raised.</p>	<p>MW</p>

<p><b>FP19/184.2</b> The Chairman recognised the amount of work undertaken however, he questioned whether the trajectory of 5800 patients was ambitious enough. The Executive Director of Planning and Performance confirmed that the plan was ambitious given that it would be less than the previous year and demand was increasing each year. The Acting Director of Nursing and Midwifery believed that the organisational position would be improved for the next year given the improvement in processes being introduced.</p> <p><b>FP19/184.3</b> The Interim Recovery Director reminded that the Improvement Groups required greater alignment and described the refocussing currently being undertaken and the groups' early stages of maturity.</p> <p><b>FP19/184.4</b> A discussion ensued on the deliverability involved with RTT, Finance and Unscheduled Care. The Executive Director of Workforce provided assurance that the Executive Team were addressing these areas. The Chairman directed that should the Executive Team become aware that any deliverables could not be managed then this would require immediate escalation to the Board. The Chairman shared recent discussions which he had had with the Hospital Managing Directors in respect of trajectories and sought confirmation that activity plans were prepared. It was agreed that the Acting Director of Nursing and Midwifery would clarify the position with the Hospital Managing Director (Centre).</p> <p><b>FP19/184.5</b> A discussion ensued on system and processes. The Executive Director of Planning and Performance confirmed that previous comments regarding deterioration provided by the Delivery Programme Director WG were being addressed. The Deputy Chief Executive NHS Wales sought clarification on BCU's deteriorating waiting list position and how the subsequent backlog was being treated. He expressed concern regarding the delivery of efficiency gains, especially in respect of change management, outsourcing, backlog and the £2.5m gap solution. He was not confident that the plan could be delivered and stated that further discussion was required. A further discussion ensued on the requirements needing to be addressed. The Deputy Chief Executive NHS Wales undertook to share observations with the Committee.</p> <p><b>It was resolved that the Committee</b></p> <p>received the report and approved the refreshed planning profiles for 2019/20.</p>	DC
<p><b>FP19/185 Unscheduled Care and Building Better Care update</b></p> <p><b>FP19/185.1</b> The Acting Executive Director of Nursing and Midwifery presented the report which provided an update against both the unscheduled care performance of each acute site and the third 90 day cycle of the unscheduled care Building Better Care programme for the period of July 2019. It was noted that July had seen an improvement in the 4 hour performance trajectory compared to the previous month and from the</p>	

<p>previous year, whilst performance remained slightly below the internal improvement trajectory.</p> <p><b>FP19/185.2</b> Attention was drawn to updates provided on ambulance performance, East, Central and West Health economies as well as demand, flow and discharge updates in respect of the Building Better Care programme. The Acting Executive Director of Nursing and Midwifery advised that the current position was not deteriorating and small improvements were being made. The Deputy Chief Executive NHS Wales stated that there were signs of stabilisation and green shoots, with the exception of Wrexham Maelor hospital – which the Chairman confirmed was to be explored at the following in-committee session.</p> <p><b>It was resolved that the Committee</b></p> <ul style="list-style-type: none"> <li>• noted the unscheduled care performance for July across BCUHB and for each health economy</li> <li>• noted the update from the Building Better Care programme and ongoing work within phase 3</li> </ul>	
<p><i>The Assistant Director Strategy ~ Capital Planning joined the meeting</i></p> <p><b>FP19/186 Capital Programme report Month 3</b></p> <p><b>FP19/186.1</b> The Assistant Director Strategy ~ Capital Planning presented this report which provided an update on delivery of the approved capital programme and progress on expenditure against the Capital Resource Limit (CRL). He drew the Committee's attention to the delay with the Shotton SMS development and also advised that slippage in relation to the North Denbighshire Community hospital (NDCH) development might result in a decrease of the CRL. In response to the Chairman, he advised that he had briefed an Assembly Member regarding the NDCH slippage following their enquiry.</p> <p><b>FP19/186.2</b> The Assistant Director Strategy ~ Capital Planning advised that an appendix had been provided in respect of the Ysbyty Gwynedd Emergency Department scheme as requested at the previous meeting.</p> <p><b>It was resolved that the Committee</b> received the report.</p>	
<p><b>FP19/187.1 Re-location of Services from Mount Street Clinic, Ruthin – Business Justification Case</b></p> <p>The Executive Director of Planning and Performance presented this case which he advised to be a strategic fit with Care Closer to Home and cost neutral. In discussion, committee member Helen Wilkinson advised that as Chief Executive of the Denbighshire Voluntary Services Council she had written to BCUHB to consider that a Third Sector representative also be appointed to the Project Board.</p>	

<p><b>It was resolved that the Committee</b></p> <p>agreed this was a good news item and approved the progress of the Business Case to the September meeting of the Health Board.</p> <p>The Chairman requested that all future business cases would require the inclusion of supporting statements provided by the Executive Director of Finance and Recovery Director</p>	<p>MW</p> <p>SH/PB</p>
<p><i>The Director Estates and Facilities and Assistant Director Strategic and Business Analysis joined the meeting</i></p> <p><b>FP19/187.2 Wrexham Maelor Hospital Continuity Programme Business case</b></p> <p><b>FP19/187.2.1</b> The Director Estates and Facilities presented this item. He advised the Committee that the programme business case had been developed to substantially reduce the risk of physical infrastructure failure at the Wrexham Maelor Hospital over the next decade, and so avoid the consequential impact on patient care. It contained details of a group of projects which would be supported by individual business cases in a 10 year programme of development work. He reported that there were 7 schemes at a total capital cost of between £50 million and £60 million. He also highlighted the provision of detail on risks and their assessments within the report.</p> <p><b>FP19/187.3</b> In response to the Chairman, the Director of Estates and Facilities confirmed that there had been no further changes to the documentation since the Board's consideration at a recent workshop session. The Chairman also questioned financial prudence and whether choices would be provided, which the Director of Estates and Facilities confirmed would be taken forward in preparation of the future business cases.</p> <p><b>It was resolved that the Committee</b></p> <p>endorsed the Continuity Programme Business Case for consideration by the Health Board to approve submission to Welsh Government.</p>	
<p><b>FP19/187.3 Redevelopment of the Ablett Unit at Ysbyty Glan Clwyd – Procurement of External Support</b></p> <p><b>It was resolved that the Committee</b></p> <p>supported the tenders recommended for acceptance.</p>	
<p><b>FP19/187.4 Development of new isolation facilities – Critical Care Unit Wrexham Maelor Hospital</b></p> <p>It was noted that the business case addressed the issue of lack of adequate isolation facilities within the Critical Care unit of Wrexham Maelor Hospital.</p>	

**FP19/187.4.1** The business case outlined two viable options to provide significantly improved facilities together with the recommendation of a preferred option which would achieve compliance against modern isolation suite technical standards at a capital cost of £1,744,000 inclusive of vat and fees. It was noted that savings would also ensue due to repatriation.

**FP19/187.4.2** The Chairman was supportive of the development however he sought assurance that appropriate challenge had been undertaken in response to the proposal which had been driven by clinical colleagues. This was confirmed.

**It was resolved that the Committee**

approved the preferred option ie the provision of 2 isolation suites which meet modern standards in terms of layout and ventilation systems and thus avoid any restriction on the type of patients who can be cared for within that environment.

*The Assistant Director Strategy ~ Capital Planning, Director Estates and Facilities and Assistant Director Strategic and Business Analysis left the meeting.*

The following item was taken out of order to support operational need.

**FP19/192 External Contracts Update**

**FP19/192.1** The Head of Contracts and Interim Head of Contracting attended for this item only. The report provided an update on the contractual position of external 'Health Care' contracts (excluding primary care contracts) for Quarter 1 2019/20. Attention was drawn to the volume and value of contracts which the Health Care Contracting Team managed as well as the forecast position. The Head of Contracts advised of a spike in expenditure relating to major trauma and also specialist contracts due to a patient requiring major burns treatment to the value of approximately £0.5m. The Interim Head of Contracting drew attention to escalating concerns in respect of quality issues with nursing homes highlighted within the report.

**FP19/192.2** The Chairman sought assurance that the contracting team forecast remained in balance and was assured that the Countess of Chester Hospital contracting issues had been resolved. He acknowledged that the Contracting Team had progressed 92% of expenditure covered by a formal contract but enquired whether any of the 8% remaining were of higher risk or required prioritisation. The Interim Head of Contracting advised that premium quality indicators that were being introduced would likely resolve the remaining outstanding contracts. The Committee also discussed the position on outsourcing and the effect on RTT.

**It was resolved that the Committee**

- noted the introduction of a clinical quality update to the Quality and Safety Group
- noted the financial position on the main external contracts at June 2019

<p>and anticipated pressures</p> <ul style="list-style-type: none"> <li>• noted the work underway in respect of stabilising wider health / patient care contracts and key risks / related activity</li> <li>• noted the challenges faced due to staff turnover</li> <li>• endorsed the uplift to the 2018/19 Domiciliary Care fees as outlined within the report at (5.3)</li> </ul>	
<p><b>FP19/189 Finance Report Month 4</b></p> <p><b>FP19/189.1</b> The Interim Financial Director – Operational Finance advised that the financial position had deteriorated, with the current actual year to date position as £14.6m deficit ie £3m adverse variance to the plan with a forecast variance position of £10m deficit against the plan of £25m. He stated there was a need to stop spending and deliver savings, and the position underlined the importance of introducing the Financial Recovery Programme by the Board. He advised that there was now stronger reporting in relation to financial recovery provided to the Executive Team.</p> <p><b>FP19/189.2</b> The Chairman highlighted the issues with the run rate, especially the worsening expenditure position in Secondary Care and drew particular attention to YGC. The Interim Recovery Director outlined the actions being undertaken in relation to financial planning and confirmed that the link between performance and finance was being fed back into Secondary Care. Following an outline of the meetings taking place by the Interim Recovery Director the Chairman questioned process effectiveness, stating that the same behaviour would result in the same outcomes if not done differently. The Interim Recovery Director outlined confidence in respect of the strong messaging undertaken around grip and control, noting that there had been improvements within schemes moving from red to amber status. He drew the Committee’s attention to issues with escalation beds. Discussion ensued regarding the potential forecast and cultural issues being addressed.</p> <p><b>FP19/189.3</b> In discussion of increasing pay spend, agency expenditure was noted to be due to demands over the June / July period which were steadily decreasing as was a reduction in Locum spend. In respect of non-pay spending the Interim Recovery Director reported that monitoring of savings plans was being undertaken and would be complete by the end of August. He also advised that high cost areas were linked to Improvement Groups with grip and control actions being developed to address the issues.</p> <p><b>It was resolved that the Committee</b></p> <p>noted the report</p>	
<p><b>FP19/190 Financial Recovery Action Plan</b></p> <p><b>FP19/190.1</b> The Interim Financial Director – Operational Finance presented the report which provided an update on the newly created Financial Recovery Action Plan, which consolidated the two action plans developed as a result of the Price Waterhouse Cooper (PWC) financial review, which concluded in June 2019. The Deputy Director FDU provided a range of comments which</p>	

<p>the Interim Financial Director – Operational Finance undertook to move forward. These included:</p> <ul style="list-style-type: none"> <li>• Finance Delivery Unit had provided comprehensive feedback on the action plans</li> <li>• Key themes were summarised for the Committee</li> <li>• FDU was unclear on the prioritisation approach adopted by the UHB</li> <li>• Concern in respect of timescales – balance between ambition and realism</li> <li>• Some actions were likely to lead to another e.g. a review would imply a follow up action</li> <li>• Plans would benefit from a review and refresh</li> <li>• The Committee might wish to consider how it receives assurance that actions are completed and having the desired impact and could consider whether internal audit have a role to play in this</li> </ul> <p>The Interim Recovery Director undertook to ensure that all actions relating to financial recovery would be progressed within the Recovery Programme.</p> <p><b>FP19/190.2</b> The Chairman requested that where any action highlighted work ‘being progressed’ that the action remain open and sought assurance that the planning process had taken on board all the PWC work undertaken.</p> <p><b>It was resolved that the Committee</b></p> <ul style="list-style-type: none"> <li>• noted the report</li> <li>• agreed that a consolidated checklist would be provided, ensuring that the FDU were informed of progress</li> </ul>	<p>TU</p> <p>PB</p> <p>TU</p> <p>TU/ PB</p>
<p><b>FP19/191 Financial Recovery Group (FRG) report Month 4 2019/20</b></p> <p><b>FP19/191.1</b> The Interim Recovery Director drew attention to the current position as at month 4 being at £10.758m variance to the target of £35m savings. Whilst £14.456m had been delivered, £1.694m was scheduled to deliver, £0.267m was in development and a further £7.823 savings were in pipeline development. He stated that whilst the FRG had met twice, 90% of the Improvement Groups were operational. He pointed to the savings narrative provided on ‘what we have done well’, ‘where we need to focus’ and ‘key risks, issues and mitigations.’ The Interim Recovery Director advised that the financial recovery programme had progressed within the 6 weeks to date and was now having traction.</p> <p><b>FP19/191.2</b> The Chairman voiced concern on the exit transition from PWC and specifically questioned remaining capability within the organisation. A discussion ensued in which the the Interim Recovery Director advised that whilst the structural elements of PWC could be undertaken, there was a risk in relation to the availability of senior programme managers to drive forward improvements. It was noted that he was keen to explore the volume of potential appropriate resource within the organisation. The Executive Director of Workforce and OD commented on work being undertaken to address this issue within the Programme Management Office (PMO) and Delivery</p>	

<p>Management Office (DMO). An update would be provided at the next meeting.</p> <p><b>FP19/191.3</b> In response to the Committee's question regarding the longevity of cultural change anticipated, the Interim Recovery Director advised that the building of sustainable change management required a 2/3 year programme, however the Improvement Groups he had introduced would contribute. He also stated his confidence had grown since commencement that the financial recovery programme would meet the control total, however the continuing run rate overspend was of concern.</p> <p><b>FP19/191.4</b> The Executive Director of Workforce and OD remarked that it would be essential for the organisation to hold its nerve regarding cultural change as whilst there were financial pinch points ahead she felt it was important to drive the programme through effectively and with fairness.</p> <p><b>It was resolved that the Committee</b> noted the report</p>	SG / PB
<p><b>FP19/193 Presentation : Value Based Healthcare</b></p> <p><b>FP19/193.1</b> The Head of Value and Savings Programme joined the meeting to provide the presentation, advising of the need for Value Based Healthcare to be an integral part of the Finance and Performance agenda and outlined its place within 'A Healthier Wales'. It was recognised as an important issue for Health and Social Care in Wales and with alignment to Patient Experience and Value for Money. He drew attention to work undertaken within Aneurin Bevan University Health Board and the increasing benefits over the past 5 years. He highlighted the important messaging that had been undertaken to reinforce language and culture ie that the system was not because of finances per se but about being more effective. He advised that whilst BCU had undertaken VBH work, the ABUHB structured model could be learned from in terms of improved benefits and outcomes for patients – and not solely about finance. The conclusions of the presentation were noted.</p> <p><b>FP19/193.2</b> In response to the Committee, the Head of Value and Savings Programme assured that patient and community input had been included within development. Following the Chairman's question regarding how this work would be progressed, the Executive Director of Workforce &amp; OD advised that benefits realisation would need to be effectively captured regarding quality work and that the Quality Improvement Group would be tasked with moving this forward. The Interim Recovery Director advised that some Improvement Groups might have the capacity to also progress this work. The Deputy Director FDU provided further detail on Value Based Healthcare practice available and also national work. The Acting Executive Director of Nursing and Midwifery reflected on the potential savings possible due to the costs involved with areas such as falls and infection prevention and control.</p> <p><b>It was resolved that the Committee</b></p> <ul style="list-style-type: none"> <li>noted the presentation</li> </ul>	

<ul style="list-style-type: none"> <li>agreed to schedule progress update following discussion with the Acting Executive Director of Finance</li> </ul>	TU
<p><b>FP19/194 Workforce Quarter 1 2019/20 performance report</b></p> <p><b>FP19/194.1</b> The Executive Director of Workforce and OD presented this report which provided a snapshot of the current position and trend analysis across a number of key workforce performance metrics. She highlighted re-alignment work and progression with the Workforce Strategy.</p> <p><b>FP19/194.2</b> In response to the Committee, the Executive Director of Workforce and OD confirmed that work had been done in respect of the correlation between sickness and non-completion of PADRs in high incident areas. The Chairman noted the ongoing work to address increases within vacancy rates and updates on progress provided to address pay spend. The Executive Director of Workforce and OD also confirmed that the resourcing team business case was being progressed.</p> <p><b>FP19/194.3</b> The Executive Director of Workforce and OD agreed to arrange a meeting to discuss Medical School progression with herself, the Executive Medical Director and BCUHB's Vice Chair.</p> <p><b>It was resolved that the Committee</b> noted the report</p>	SG
<p><b>FP19/195 Retention Update</b></p> <p><b>It was resolved that the Committee</b> noted the report</p>	
<p><b>FP19/199 Welsh Government Monthly Monitoring Return</b></p> <p><b>It was resolved that the Committee</b> noted the report</p>	
<p><b>FP19/200 Summary of InCommittee business to be reported in public</b></p> <p><b>It was resolved that the Committee</b> noted the report</p>	
<p><b>FP19/201 Issues of significance to inform the Chair's assurance report</b></p> <p>To be agreed with Chair</p>	
<p><b>FP19/202 Date of next meeting</b></p> <p>It was noted that the Committee would next meet on 30.9.19 at 9.30am in the Boardroom, Carlton Court</p>	

**FP19/203 Exclusion of the Press and Public**

**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.