

Local Partnership Forum

Minutes of the meeting held on 25th April 2019 in the Clwyd Room, Unison NWHB, Unit 5520, North Wales Business Park, Abergele, LL22 8LJ

Present	
Mr G Doherty (GD)	BCUHB - Chief Executive
Mr David Barber	British Dental Association
Mr Ben Bowden	GMB Trade Union
Ms J Tomlinson (JT)	UNISON NWH Branch Secretary
Ms S Cawdell (SC)	UNISON Branch Officer - West
Mr R Nolan	BCUHB – Finance Director (Commissioning & Strategy)
Ms S Green (SG)	BCUHB - Executive Director of Workforce & Organisational
	Development (OD)
Ms L Hall (LH)	BCUHB - Assistant Director, Workforce & OD
Mr T Hubbard (TH)	BCUHB – Deputy Executive Director of Nursing
Mr L Hayes	UNISON
Mr R Hayes (RH)	Chartered Society of Physiotherapy, Union Representative
Mrs J Hughes (JH)	Independent Member (Trade Union)
Mr G Jackson (GJ)	UNISON
Ms C Jones (CJ)	Royal College of Nursing
Ms J Jones (JJ)	BCUHB - Interim Head of Secondary Care
Ms K Jones (KJ)	Royal College of Midwives
Mr B Nichols (BN)	Royal College of Nursing
Mr M Openshaw (MO)	UNISON NWH Health & Safety Officer
Mr R Tanswell (RT)	UNISON

In attendance

Kirsty Thomson	BCUHB – Head of Fundraising
Mr M Townson	BCUHB – Senior Equalities Manager
Mrs F Lewis	For minute taking

Agenda Item	Action By
L19/23 Apologies for Absence	
L19/23.1 Apologies were received from John Darlington, June Davies, Russell Favager, Kay Hannigan, Gill Harris, Lynne Joannou, Ffion Johnstone, Clare Jones, Kerry Macdonald, James May, Richard Oldfield, Kate Parry, Susan Williams.	
L19/24 Minutes of the previous meeting held on 8.1.19 and Summary Action Plan	
L19/24.1 The draft minutes were approved as an accurate record and updates were provided to the action log.	

SG

L19/25 Update on Special Measure

L25.1 Mr G Doherty reported that although BCUHB remains in Special Measures, Maternity, GPs and Primary Care Out of Hours Services have now been removed. Waiting times and finances continue to be two main areas for improvement. Mental Health Services is seen to be making significant progress however child and adolescent services are particularly affected by unfilled vacancies. A formal update is to be given to Welsh Government in May.

- Mr Gary Doherty recognised the fact that both patients and staff need to see improvements.
- Mr Gary Doherty was asked about the current complex situation with The Countess of Chester Hospital arising where, without warning and with immediate effect (1st April 2019) is to now only to accept welsh patients in either A&E, Maternity or specific, pre-arranged cancer patients. After discussion, it was agreed that it will ultimately be down to both the Welsh and the English Government to agree a way forward – discussions are ongoing. If no agreement, than there are arrangements currently being put in place to bring necessary services in-house.

L19/26. Finance update Month 12.

L19/26.1 Mr R Nolan presented the report, which showed that there was a draft unaudited over spend of \pounds 40.3m, as opposed to the planned budget deficit of \pounds 35m which represents an adverse variance of \pounds 5.3m against the financial plan. The key reasons for the in-month over spend were:

- Under delivery against savings plans across most divisions (£0.9m)
- Over spends on CHC (£1m) and pay (£0.4m)
- Offsetting under spends seen in contracts (£0.6m)
- RN indicated that a legal case currently taking place in England may affect bank staff and holiday entitlements and a piece of work is currently taking place to quantify.
- GD pointed out that there is not an improving trend, and this is the context in which Welsh Government has asked Price Waterhouse Cooper to identify why certain Health Boards have been able to reduce their over spending and BCUHB has not.

L19/27 LPF Annual Report for 2018/19

L19/27.1 Mrs S Green informed the Forum that she felt that certain parts of the Annual Report required slight amendments – she felt that there were some anomalies in the attendance registers which needed to be addressed, that there was no mention of the Health and Safety Workshop which had taken place, it was also agreed that there should also be some additions to the 'primary focus of the Forum over the next 12 months. SG agreed to take the report away, amend and circulate it to the Forum members and, if there were no objections, it is to be submitted.

L19/28 Unscheduled Care – Verbal update

L19/28.1 Mr T Hubbard presented his Performance Update report and started by saying that March's monthly performance position was lower than projected - 71.1% as opposed to 77% - but was higher than the same month last year (70%) due in some part to higher than expected ED patients at YGC.

 The Unscheduled Care – Building Better Care plan was formally launched in October 2018, and designed to be delivered in 90 day cycles – the second of these 90 day cycles commenced on 4th March 2019. Between November and the end of March SICAT proved to be successful – having taken 930 calls and saving 678 ED attendances, with over half being referred to alternative providers, including GPs.

L19/28.2. Mr T Hubbard noted progress in certain areas –

- ambulance handovers had continued to improve throughout March and that ambulance delays have reduced by more than 60% on last year's figures
- Significant work has commenced on the development of an acute medical model incorporating ambulatory care across all three sites; however this is proving to work better in WMH than in the other two sites. Work is being undertaken to establish the reason.
- Safer principles continue to be embedded across the sites and a plan is in place to continue the implementation however due to the high number of nursing and medical staff vacancies, there is a concern around pace and ability to support.

L19/28.3. Concerns regarding discharge were being focussed on with various efforts to inform patients about their discharge planning process –

- Monthly meetings to take place with Local Authorities to set up a working group to develop standards to support the discharge principles.
- Look at the Discharge SOP and its methodology.
- Review of Third Sector to support winter discharge Red Cross, Social Services
- Access to community beds

L19/28.4. A major aim is to utilise existing facilities more efficiently, ie Mold MIU, and to celebrate the significant improvements in various areas. Mr G Doherty summarised by saying that there is significant progress but still much work to be done.

L19/29 Health & Safety Management – verbal update.

L19/29.1 Mrs S Green provided a verbal update and advised that

- the Associate Director of Health, Safety and Equality, Peter Bohan, had been appointed and that he would be leading on the development of 3 year Improvement Plan. It was suggested and agreed that this would be the topic for a workshop at the next meeting.
- The progress to date against the objectives for 2019/20 included a meeting which had been held with HSE to go through the plans significant progress has been made. A key action to take forward is learning from themes as repeats in incidents is not acceptable.

• accountability for security had moved to the Health & Safety Team and a review of security across the Health Board will be undertaken in 2019/20.

L19/29.2 A question arose around restraining patients without capacity. Concern was raised that BCUHB's policies and advice from the Police conflict. Mrs Green confirmed that policies in this regards are currently being reviewed bearing in mind what is reasonable to expect from patients and staff. The HASCAS report highlighted that staff had been expected to do certain things that they had not been trained to do. This is to be addressed.

L19/29.3. Mr W Nichols asked who will make up the Health and Safety Group and when it is due to meet. Mrs Green advised that decisions had yet to be made and when they were, they would be communicated.

L19/30 Prevention and Control of Infection update.

L19/30.1 Mr T Hubbard presented his paper showing it to be a broad program of work that is being undertaken. An expert review was previously undertaken by Ms Janice Stevens, who is due to return for a further review in June. It was noted that BCUHB is the most improved Health Board in Wales – over the last 12 months there has been a significant decrease in patients contracting C.difficile and MRSA blood stream infections by more than 50%.

L19/31 Job Evaluation Team Report – verbal update.

L19/31.1 Ms L Hall indicated that there was good news to report. The new library of Welsh generic job descriptions continues to prove successful in reducing delays to filling posts. Consistency checking is also working well.

L19/31.2 Mrs J Tomlinson reported on the feedback she has received from managers via their teams regarding Job Description Library. She noted that they were pleased that it is in place and that it helps immensely. Mrs Tomlinson also noted that, as TU partners, they were pleased the backlog of jobs for matching continues to decrease and that showing the willingness working in partnership, whilst maintaining the National Agreement, sees local changes making a difference for all involved in the process. It will have a wider impact on staff and recruitment to posts.

L19/31.3 Mrs S Green confirmed that there needs to be a cultural change to speed up the process as historically job descriptions have been expected to be unnecessarily too specific. Trust and confidence must be maintained by both the individual and BCUHB that people to ensure that all staff are being paid equally for the same work.

L19/32 Workforce Report.

L19/32.1 Mrs S Green tabled her report. There were no questions.

L19/33 Gender Pay Gap Action Plan.

L19/33.1 Mr M Townson confirmed that the 2019 Report had been published as good practice. The report came from a task and finish group which looked at local and national evidence with the intention of helping to improve awareness of and access to healthy work/life balance opportunities. Certain points were highlighted:

- For Medical and Dental staff, the ratio is 3:1 male to female.
- For Admin and Clerical staff, 93% of all part-time work is carried out by women
- Reporting alone will not address the issues but flexibility and raising awareness will.
- Are managers being supportive enough?
- There is a need to look at exit interviews
- Training opportunities

Ms J Hughes asked how the latest move by the Health Board to standardise shifts could work alongside the highlighted need for flexibility. Mrs S Green agreed that a common-sense approach is needed in each area and that there needs to be a balance to provide stability with staff as flexibility is not a right of passage. This will be challenging but is necessary.

(Ms K Thomson joined the meeting)

L19/34 Awyr Las Staff Lottery – Presentation from Charitable Funds

L19/34.1. Ms K Thomson joined the meeting and delivered a presentation which discussed the merits of staff lotteries. Following the presentation and an ensuing discussion, the following points were agreed:

- The number of plays per person needs to be restricted. It was unanimously felt that 5 was too many plays per person per week
- Governance and management are essential to making a staff lottery work well
- Gambling awareness information should be circulated with staff lottery information
- Staff health and wellbeing which takes into account poverty should be considered as a priority area which is funded through the lottery
- Applicants from across BCUHB should be able to apply for a grant from the monies raised through the lottery, irrespective of whether they have additional charitable funds available.
- It was noted that Nightingale House receives18% of their income from their well-run staff lottery.

It was agreed that she would take these points forward and develop a proposal.

(Ms K Thomson left the meeting).

L19/35 Safe Staffing – verbal update

L19/35.1 Mr T Hubbard confirmed that his report is to go to the Board in May. Within the report the following points were highlighted:

- A piece of work is needed to see if there is a link between complaints and staffing levels.
- Severe shortage of staff in Paediatrics a shortage of 22 FTE.

There were 2 incidents at YG where failure to maintain staffing levels was deemed to be a contributory factor.			
deemed to be a contributory factor.There were 5 incidents where falls led to death of patients across the 3 main			
sites.Staffing masterclasses for nurses are taking place.			
 Pressure ulcer collaborative 			
L19/35.2. Mr W Nichols asked for an update on the situation which has led to the shortage of staff in Paediatrics, to which Mr T Hubbard confirmed that it is an			
improving situation.			
L19/36 Call for Nominations – RCN Wales Nurse of the Year Awards 2019			
L19/36.1 The RCN recently launched the search and historically applications have			
been very low. Mr G Doherty felt that this was not due to the fact that there are no good nurses but more that people need to be encouraged to nominate staff. Mrs S			
Green felt that it should be better communicated via the Communications			
Departments and that she would speak to Mrs K Sargent to find better ways to			
bring the 'Call for Nominations' to people's attention.	SG		
L19/37 Summary of Information to include within the LPF's Chair's Assurance report to the Health Board.			
L19/37.1 To be agreed outside the meeting.	GD		
L19/38 Integrated Quality and Performance Report			
L19/38.1 The Summary report was noted. There were no questions.			
L19/39 Welsh Partnership Forum Minutes.			
L19/39.1 It was noted that they had not been supplied and will be circulated once received.			
L19/40 Annual Audit Report – Wales Audit Office.			
140/40 4 The Depart was noted. There were no supptions			
L19/40.1 The Report was noted. There were no questions.			
L19/41 Corporate Planning Update.			
L19/41.1 The Report was noted. There were no questions.			
L19/42 Documents Circulated via Email to Members between Meetings			
L19/42.1 Noted.			
L19/42 Any Other Business			
L19/42.1 None raised.			

L19/43 Date of Next Meetings

Tuesday, 9th July, 1pm, Boardroom, Preswylfa. Tuesday, 8th October, 1pm, John Platt Room, Bryn y Neuadd.