

**Betsi Cadwaladr University Health Board (BCUHB)**  
**Stakeholder Reference Group (SRG)**



**Notes of the meeting held on 3 March 2020**  
**in the Boardroom, Preswylfa, Mold**

<b>Present:</b>	<b>Representative of:</b>
Mr Ffrancon Williams	Housing Associations (Chair)
Mr Gwilym Ellis Evans	Mantell Gwynedd (Vice Chair)
Mr Mark Wilkinson	Director of Planning and Performance, BCUHB – Lead Exec
Cllr Joan Lowe	Wrexham County Council
Mr Garth Higginbotham	NWCHC
Cllr Mike Parry	One Voice Wales
Cllr Christine Marston	Denbighshire County Council
Mr Trystan Pritchard	North Wales Hospices
Mrs Fiona Evans	Conwy Voluntary Services Council
Mrs Debbie Thompson	Denbighshire Voluntary Services Council
Mrs Ann Woods	Flintshire Voluntary Services Council
Mrs Mary Wimbury	Care Forum Wales
<b>In Attendance:</b>	
Ms Angie Nisbet	Programme Manager
Mrs Kamala Williams	Head of Strategy
Mr Kyri Alexandrou	BCU Clinical Lead for Urology
Suzanne Didcote	Secretarial Support

<b>Agenda Item</b>		<b>Action</b>
S20/1	<b>Welcome and Apologies</b>	
S20/1.1	The Chair welcomed everybody to the meeting.	
S20/1.2	<u>The following apologies were received:</u> Cllr Dafydd Meurig, Gwynedd County Council Mrs Jackie Allen, Wrexham Third Sector Mrs Katie Sargent, Assistant Director – Communications, BCUHB Cllr Llinos Medi Huws, Anglesey County Council Cllr Gladys Healey, Flintshire County Council Cllr Louise Emery, Conwy County Council Prof. Robert Moore, NWREN Sian Purcell, Medrwn Mon Voluntary Services Council	
S20/1.3	The process for filling the posts of Chair and Vice Chair would start shortly. Members of the SRG will be written to and asked for their expressions of interest in these roles. Following this nominations would be circulated to the Group for them to vote on. The new Chair and Vice Chair positions would then be confirmed at the BCU Health Board and the successful candidates would take up their roles from the June meeting.	<b>SD</b>

**Betsi Cadwaladr University Health Board (BCUHB)**  
**Stakeholder Reference Group (SRG)**

S20/2	<b>Declarations of Interest</b>	
S20/2.1	No declarations of interest were received.	
S20/3	<b>Planning Update</b>	
S20/3.1	Mark Wilkinson, Executive Director of Planning and Performance gave an update on the planning process and preparations for future years. The change in CEO was noted with Simon Dean from Welsh Government covering the role in the interim. The Board have not been able to produce an approved 3 year plan, for various reasons, including lack of financial balance against allocated resources. There is a focus on producing a Plan for 20/21 which shows evidence of improved deliverability in Planned Care, Unscheduled Care and Finance. The Board was working in 2019/20 to a £35m deficit, Welsh Government wanted this to be £25m, but it is around £41m at present. Garth Higginbotham commented that these were large numbers and asked what they were in terms of the percentage of the overall Health Board budget. Mark Wilkinson confirmed this was around 2.7% - 3%.	
S20/3.2	The Board are putting together a multi-year package. This will give a longer term 3 – 4 year funded plan. Work will continue with the Regional Partnership Board and other partners to address priorities. There is also a need to sharpen up the process of accountability for performance within the Health Board.	
S20/3.3	Cllr Mike Parry asked why, when the Health Board had been in Special Measures for 5 years, it was only now realising these issues. Mark Wilkinson explained that progress has been made every year. There are more people presenting to our Emergency Departments, people are living longer, more care is being delivered, more is being done under pressure. Part of the solution will be additional funding but in a targeted way. Mark explained that significant progress had been made in Primary Care, Maternity and Mental Health. Ffrancon Williams reiterated the issue with WG funding, giving RTT funding as an example, where monies are received late in the year and is taken away if targets are not achieved. This can sometimes be ineffective.	
S20/3.4	Mary Wimbury raised that it sometimes felt as if the Health Board focus on bottom line costs rather than value for money, which can have a negative effect. The lowest price does not always provide the highest value service or item, in particular in the Care sector. It is also not always clear where management and accountability lie within the Health Board. Mark Wilkinson noted this.	
S20/3.5	Mary Wimbury asked how the Coronavirus outbreak was affecting any of these plans. Mark Wilkinson explained that we are in a mitigation phase over the next few weeks. Efforts are concentrating on containment and tracing, testing is undergoing. The Health Board are following guidance from Welsh Government and Public Health Wales. There will be a command and control centre set up. The Local Resilience Forum (LRF), which is multi agency is setting up a tactical	

**Betsi Cadwaladr University Health Board (BCUHB)  
Stakeholder Reference Group (SRG)**

<p>S20/3.6</p> <p>S20/3.7</p>	<p>group. Cllr Joan Lowe asked whether local planning was taking place. Mark explained that the LRF is North Wales wide.</p> <p>Cllr Joan Lowe said that Local Authorities were in the same position with regards to funding and it sometimes feels like there is a North / South divide. She felt that there were opportunities to work together. These opportunities do exist with the various forums that are in place, including the North Wales Regional Leadership Board which our CEO and Chairman sit on.</p> <p>The Chair summarised that the challenges with funding mechanisms are noted. The potential financial support package plans are welcomed and the Group endorsed that. In addressing financial issues, value for money is key. The focus on sharpening accountability is also welcomed.</p>	
<p>S20/4</p> <p>S20/4.1</p> <p>S20/4.2</p> <p>S20/4.3</p> <p>S20/4.4</p> <p>S20/4.5</p>	<p><b>Ophthalmology Business Case</b></p> <p>Angie Nisbet, Programme Manager was welcomed to the meeting to give a presentation on the development of a business case for Ophthalmology. Poor eye health is common and increasing. There is a need to address national targets and monitor the backlog of patients. Pathway redesign is important. Drug costs are frequently high. There are three core pathways being addressed, Glaucoma; Wet AMD and Cataracts. Key design principles for Cataracts include reducing the pathway so that patients are seen more timely, reducing outpatient appointment steps, creates more space for those higher risk patients that need to be seen. For Glaucoma these include the set up of 6 Optometric Ophthalmic Diagnostic and Treatment Centres. For Wet AMD, funding for Abergele Hospital provided a specialised suite and a training unit.</p> <p>Trystan Pritchard asked how the Glaucoma ODTTC locations were chosen. Angie explained that capacity had been looked at. Health Education and Improvement Wales (HEIW) are also looking at what Optometrists can be developed in.</p> <p>Cllr Christine Marston asked what the cost implications are. Angie explained that there are 3 different banding levels and is a third of the cost to carry out in optometric centres. Patients do not have to go to a GP for a referral, a lot of this is detected through eye tests carried out. Cllr Marston asked why appointment times were increasing, is it due to cost of drugs or capacity? Angie explained that some has been space and training or capacity of staff.</p> <p>Cllr Mike Parry asked why there is a rise in the number of Wet AMD cases. Angie explained that it was due to eye health deterioration.</p> <p>The Chair summarised that the Group positively received the work been undertaken in terms of patient experience. He reiterated the need to monitor outcomes to ensure benefits are delivered and cost pressures are addressed. It was noted that this also fits with the Care Closer to Home work of the Health Board.</p>	

**Betsi Cadwaladr University Health Board (BCUHB)**  
**Stakeholder Reference Group (SRG)**

S20/5	<b>Urology Presentation</b>	
S20/5.1	<p>Kamala Williams, Head of Strategy and Mr Kyri Alexandrou, BCU Clinical Lead for Urology were welcomed to the meeting to give a presentation relating to the business case development for Urology Services. There are a number of interdependencies with other services. There are a number of challenges with recruitment which has resulted in services being provided out of area, long waiters, and not making the best use of services available. A review commenced in 2017 to increase services, targets and patient experience. Consultation was undertaken on major cancers being undertaken at Ysbyty Gwynedd and complex stone work at Wrexham Maelor. Nearly all routine services would still remain on three hospital sites. There would potentially be no inpatient facility at Glan Clwyd, but emergency services would still be accessed and transferred East or West as necessary. The benefits might include sustaining services, developing centres of excellence and supporting the development of robotic assisted surgery. The next steps will be to finalise the service model and develop the business case. Engagement will continue. The Business Case will be presented to the March Health Board, or early in the next financial year for work to commence from April onwards.</p>	
S20/5.2	<p>Ann Woods asked how this is addressing the Care Closer to Home work. Kamala explained that the review started due to the sustainability of Urology services. Other work and pathways are being looked at to address this, including apps for home monitoring etc. Kyri Alexandrou reiterated that services are not being removed, patients will still have access to these, it is the complex cases that will go elsewhere. He added that Robotic Assisted Surgery (RAS) will aid other specialities too.</p>	
S20/5.3	<p>Debbie Thompson asked about the implications for the male population who are often scared of accessing the system. Kyri Alexandrou said that the number of referrals has gone up considerably amongst males and that this is an indication that the male population are more aware. There is also an increase in the number of older people seen.</p>	
S20/5.4	<p>Cllr Mike Parry reflected on the cost savings to be made here with RAS. Kyri Alexandrou stated that we are the only area in the UK that does not have a robot, which will be an issue for recruitment as all new doctors are trained in this and it is an attraction.</p>	
S20/5.5	<p>Trystan Pritchard raised concerns about engaging and how changes to services are received publicly. There is an impact on clinical dependencies and travel times for patients. Kamala explained that we have to continue engaging, we have to address the issues that the Health Board is facing, and there is a need for a clinically led case, with the Clinical leads getting involved in the engagement.</p>	
S20/5.6	<p>The Chair summarised that the work undergoing has the support of this Group. The need to address recruitment, cost and patient experience is welcomed. Disappointment was expressed on the time</p>	

**Betsi Cadwaladr University Health Board (BCUHB)**  
**Stakeholder Reference Group (SRG)**

	is has taken to get this far and that there should be no further delay. The Group also wanted to express that due consideration be given to addressing politics around engagement so that we do it to greater effect.	
S20/6 S20/6.1	<b>Annual Report – draft</b>  The draft SRG Annual Report is due to be finalised and submitted to the Health Board. Members are welcome to comment on this prior to submission. Comments are asked for by the end of March 2020.	<b>All</b>
S20/7 S20/7.1	<b>Draft Notes of previous meeting held 17<sup>th</sup> December</b>  The draft notes were accepted as an accurate record, subject to a minor change to the attendance of Cllr Mike Parry to reflect the time before he became a member.	
S20/8 S20/8.1	<b>Chair’s Advisory Report to Board</b>  The Chair’s Report to the Board was received and it was noted that the Group’s messages are clearly fed back.	
S20/9 S20/9.1	<b>Summary Action Log</b>  It was noted that all actions are closed.	
S20/10 S20/10.1  S20/10.2	<b>Items to be considered for next meeting &amp; Forward Plan</b>  The following items were agreed for the next meeting: <ul style="list-style-type: none"> <li>• Welsh Ambulance Services Trust</li> <li>• Services Strategy</li> <li>• Any business cases as needed</li> <li>• Medicines Management update</li> </ul> Cllr Mike Parry asked whether the recent exchange of correspondence between himself and Mark Wilkinson relating to Ambulance delays could be shared with SRG members for information. Mark agreed that he would share this and it would be helpful to flag this with WAST too in advance of them attending the next SRG meeting.	<b>MW</b>
S20/11 S20/11.1	<b>Evaluation of Meeting</b>  It was noted that the quality of presentations was very high and this would be fed back to the presenters. It was felt really useful having a clinician attend and to be involved in discussions. The acoustics in the Boardroom at Preswylfa were noted as not being the best, but the aim to use in-house venues and to move across the patch was welcomed by Members.	
S20/12	<b>For information – Items circulated between meetings</b>	

**Betsi Cadwaladr University Health Board (BCUHB)**  
**Stakeholder Reference Group (SRG)**

S20/12.1	No items were circulated between meetings.	
S20/13	<b>Items circulated to members for information</b>	
S20/13.1	The following items had been circulated for information: <ul style="list-style-type: none"> <li>• Finance Update</li> <li>• Annual Quality Statement</li> </ul>	
S20/14	<b>Date of Next Meeting:</b>	
S20/14.1	The next meeting is to be held on Monday 22 <sup>nd</sup> June in the Boardroom, Ysbyty Gwynedd, Bangor.	

Attendance Register:

Name	Title / Organisation	4/6/19	10/9/19	17/12/19	3/3/20
Mr Ffrancon Williams	Housing Associations (Chair)	√	√	√	√
Mr Gwilym Ellis Evans	Mantell Gwynedd (Vice Chair)	√	√	√	√
Mr Mark Wilkinson	Director of Planning and Performance, BCUHB – Lead Exec	√	√	√	√
Cllr Penny Andow	Conwy County Council	x	x		
Cllr Louise Emery	Conwy County Council			√	X
Mrs Fiona Evans	Conwy Voluntary Services Council	x	x	√	√
Cllr Llinos Medi Huws	Anglesey County Council	x	x	x	X
Cllr Christine Jones	Flintshire County Council	x	x	x	X
Mr Andy Long	WAST – Area Manager North	x	x	x	X
Cllr Joan Lowe	Wrexham County Council	X	x	X	√
Cllr Christine Marston	Denbighshire County Council	X	x	X	√
Cllr Dafydd Meurig	Gwynedd County Council	X	x	X	X
Professor Roberts Moore	North Wales Regional Equality Network	X	√	√	X
Cllr Mike Parry	One Voice Wales	X	√	√	√
Mrs Sian Purcell	Medrwn Mon Voluntary Services Council	X	√	x	X
Mrs Ann Woods	Flintshire Voluntary Services Council	X	x	√	√
Ms Claire Sullivan	NEWCIS	X	x	x	X
Mrs G Winter	Carers Trust	X	x	x	X

**Betsi Cadwaladr University Health Board (BCUHB)  
Stakeholder Reference Group (SRG)**

Mrs Sally Baxter	Assistant Director Health Strategy, BCUHB	√	√	x	X
Mrs Debbie Thompson	Denbighshire Voluntary Services Council	√ Julie Pierce attended	√ Mair Davies attended	x	√
Ms Llinos M Roberts	Carer's Outreach Service, BCUHB West Area	√	x	√	X
Mrs Mary Wimbury	Care Forum Wales	√	x	x	√
Mr Mark Thornton	NWCHC Chair	√	x G Higginbotham attended	x GH attended	X GH attended
Mrs Katie Sargent	Assistant Director – Communications, BCUHB	√	√	x	X
Mr Trystan Pritchard	North Wales Hospices Rep		√	x	√
Mrs Jackie Allen	Wrexham Third Sector			√	x