Betsi Cadwaladr University Health Board
Partnerships, People and Population Health (PPPH) Committee

Minutes of the meeting held in public on 12.7.22, held virtually via Teams

Present:	
Nicola Callow	Independent Member (Vice Chair) Chairing in place of Linda Tomos
John Cunliffe	Independent Member (IM)
John Gallanders	Independent Member
In Attendance:	
Andrea Williams	Head of Informatics Programmes Assurance and Improvement
Catrin Roberts	Collaboration Team North Wales Regional Partnership Board (NWRPB)
Chris Stockport	Executive Director Transformation, Strategic Planning, & Commissioning
Gaynor Thomason	Interim Executive Director of Nursing & Midwifery
Helen Stevens-Jones	Director of Partnerships, Communications and Engagement
Jody Evans	Corporate Governance Officer (Standing in as Secretariat)
Justine Parry	Assistant Director of Information Governance & Risk
Molly Marcu	Interim Board Secretary
Nick Lyons	Executive Medical Director
Rob Nolan	Finance Director – Commissioning and Strategic Financial Planning
Sally Baxter	Assistant Director ~ Health Strategy
Sue Green	Executive Director of Workforce & Organisational Development (WOD)
Teresa Owen	Executive Director of Public Health
Observing	
Dave Harris	Head of Internal Audit
Jackie Hughes	Independent Member (IM)

Agenda Item	Action
PP22/60 Chair's welcome and apologies **PP22/60.1** Apologies received from Linda Tomos, Adrian Thomas, Gareth Evans, Dylan Roberts, Gaynor Thomason and Gill Harris.	
PP22/62 Declarations of Interest **PP22/62.1** None to report at the meeting.	
PP22/62 Draft minutes of the Partnerships, People and Population Health Committee held on 20.5.22. **PP22/62.1** The minutes were approved. **PP22/62.2** It was agreed to review the length of the minutes and refer to titles, rather than naming individuals within future iterations.	OBS Team

PP22/63 Action Log **PP22/63.1** The table of actions was updated.	
PP22/64 Report of the Chair **PP22/64.1** The Chair advised that there had no items to report on.	
PP22/65 Report of the Lead Executive **PP22/65.1** The Lead Executive highlighted that the Executive Delivery Groups had started to meet, however there was not yet a consistent and systematic cycle to enable the assurance reports to feed into the PPPH. It was anticipated that this would be in place in time for the next meeting.	CS
STRATEGY	
PP22/66 Annual Plan and compliance with the Wellbeing of Future Generations (Wales) Act (2015) **PP22/66.1** The Assistant Director of Health Strategy presented the report and provided the update concerning the Health Board's response to previous Audit Wales recommendations. **PP22/66.2** The Assistant Director of Health Strategy emphasised from previous discussions that, the recommendations had been updated and Internal Audit had been content with amendments, in relation to the specific responses to recommendations within the paper. The focus of the environmental issues was acknowledged and further work to ensure assurance levels was raised. It was expressed that there were 2 risks, which had been logged via the Datix system, in response to a Deep Dive. The challenge to continue to invest in long-term sustainability and planning was acknowledged. The Committee accepted the update and questions were invited. **PP22/66.3** The Committee Vice Chair requested clarification pertaining to links with the Integrated Medium Term (IMTP), in relation to asset management strategy and estates. The stance was clarified, via the Well-being of Future Generations, and via other Strategies. Links to the Asset Management Strategy would require clarification, the Assistant Director of Health Strategy agreed to review and clarify with the Assistant Director of Finance. The Assistant Director of Health Strategy also agreed to review throughput and links periodically, in relation to how evidence was being fed through. **PP22/66.4** An Independent Member (IM) questioned the level of partnership working and involvement that was undertaken. The Executive Director of Public Health confirmed Health Board staff attend the Public Service Board Meetings and Team Members were heavily involved. It was confirmed that discussion and involvement had expressly matured, it was reiterated that Needs Assessments were communicated effectively. It was acknowledged that the purpose of the 2022 refresh was to review findings; arising from assessments, in order to flag out key messages. It was also raised that Surveys, along with Needs Assessments fed into Strategic	 SB

Plans, and were handled separately, via single data gathering. **PP22/66.5** It was resolved that the Committee note the update. [SB left the meeting at 10:12am]	
PP22/67 The Digital Strategy Review **PP22/67.1** The Head of Informatics provided the report on behalf of the Chief Digital Information Officer. It was stated that following on from the recent appointment of the Chief Digital and Information Officer; Informatics discovery work continued, with regards to learning, development and planning to improve and modernise the way that digital, data and technology was delivered within BCUHB. Implementation of the digital strategy had started in the 2021/22 period at pace, with key areas of success such as the implementation of the online patient experience system, Symphony, the Welsh Patient Administration system, Office 365 as well as the rollout of mobile equipment for staff to enable agile working. The Chair acknowledged the significant amount of work accomplished by the informatics team. **PP22/67.2** An IM acknowledged the positive steps taken to achieve the progress to date, but also raised a question regarding partial completions, highlighting actions RAG rated as amber on the action plan. The Head of Informatics explained that the theme was due to resources, a discussion ensued. The Head of Informatics assured the IM that the focus had predominantly been on project delivery, however acknowledged the requirements to prioritise, and confirmed it was under review by the Programme Management Office. Levels of increase and demand was also raised. **PP22/67.3** Members enquired whether the BAF required an update or escalation in risk rating, in order to adequately highlight the resource and capacity issues outlined by the Head of Informatics. Specific reference was made to Board Assurance Framework (BAF) Risk 21.16. It was agreed the Executive Director of Workforce and OD would consider the potential effect on the Board's Corporate Risk relating to recruitment. The Interim Board Secretary enquired whether the Head of Informatics was of the view that there was an enhanced to risk exposure, on resources, or whether this remained within a tolerable range. It was noted that the Health Board (HB) was in a better position, in terms of Welsh Government funding, however finance issues were ongoing. An IM confirmed that a meeting was scheduled to review the risk with the Chief Information Officer, in order to consider the changes to resources and terms of structure, along with deliverability and levels of detail within the strategy. It noted that the BAF was to be submitted to the HB Meeting in July 2022, and that the risk was to be reviewed ahead of the meeting. **PP22/67.4** An IM raised a question regarding the NHS Application development, and how engagement and consultation had taken place within North Wales. The Committee noted the ongoing pilots and benchmarking going on nationally. Impacts on a national level, in terms of risk identification was also discussed, along with management of patient and customer expectations that seemed to be very much primary care focussed. External pressures and expectations of the launch was raised, and it was agreed that assurance levels were to be monitored and future updates would be provided within future reporting, as the development progresses.	SG AW

PP22/67.5 A discussion then ensued in relation to reinforcement of cross escalation of key drivers, (relating to risks upon the BAF and CRR).	
PP22/67.6 The Digital Communities Wales Appendix was discussed, and an IM suggested the possibility of widening opportunities for trade unions; to work alongside informatics, to enable training for Estates and Facilities Staff to be made more accessible. The lack of office 365 knowledge and skills was highlighted, along with the large uptake on the offers of training. The Head of Informatics acknowledged the suggestion.	
PP22/67.7 An IM raised a query with regards to progression of the Eye Care Program and the WCCIS Business Case approval. Levels of support regarding social prescribing was also raised, the Committee acknowledged the continuing work in order to implement and support at lower levels, with regards to intervention verses demand. An offline discussion was agreed between the IM and the Head of Informatics regarding social prescribing.	AW
PP22/67.8 It was agreed that assurances of progress levels and achievements made, and the "Partial" achievements and vulnerabilities of recruitment and retention were to be further revisited, in light of the slippage and priorities, as well as the risk exposure (as outlined in the BAF), which was noted to have changed from the time of the original assessment.	
PP22/67.9 The Committee agreed that the "partial" achievements within the Digital Strategy Review, and vulnerabilities of recruitment and retention and the cross escalation of key drivers, relating to risks on the BAF and CRR would be reviewed at the next meeting.	DR
PP22/67.10 It was resolved that the Committee noted the report.	
PP22.68 Integrated Digital Informatics Assurance Review **PP22.68.1** The Head of Informatics Programmes Assurance and Improvement presented the paper and highlighted key points relating to progress against the Digital Strategy 2021 – 2024; • Secondary Care - Multi Disciplinary – Welsh Patient Administration System • Urology - My Medical Record – Prostate Specific Antigen (PSA) Tracker • Secondary Care - Multi Disciplinary – Digital Health Record • Secondary Care - Multi Disciplinary – Welsh Nursing Care Record • Secondary Care - Multi Disciplinary – Welsh Emergency Department System/Symphony • Secondary Care - Multi Disciplinary – Endoscopy System • Secondary Care - Multi Disciplinary – Results Management • Secondary Care - Multi Disciplinary – WCCIS **PP22.68.2** Questions were invited, and an initial discussion arose with regards to responses and critical prioritisation.	

PP22.68.3 An IM raised concern relating to factual accuracies of the WCCIS report, regarding implications of the reviews and engagement, along with the impacts and delays. The requirement to review the key agenda elements moving forwards was noted. The Executive Medical Director acknowledged that the governance and representational aspects of the Digital Health Record were to be reviewed.	AW
PP22/68.4 Discussion ensued concerning progress of funding elements, following concerns raised by an IM, relating to WPAS funding. Following the discussion, the Head of Informatics also agreed to feedback to the IM concerning the Limms system and of any impacts on patients, relating to delays.	AW
PP22/68.5 The Committee agreed that the Executive Medical Director, Interim Board Secretary and Chief Digital information Officer review the clinical risk exposure associated with the delivery of the digital priorities.	NL, MM, DR
PP22/68.6 It was resolved that the Committee note the report and reviewed the levels of assurance.	
PP22/69 - Test, Track and Protect (TTP) Programme Update **PP22/69.1** The Executive Director of Public Health provided the verbal report to the Committee. The Committee was advised that the new phase of the programme commenced on the 1st July 2022. **PP22/69.2** It was noted that the tracing element of the TTP was reducing by 80%. It was confirmed that partners were working with the outstanding 20%. It was confirmed that Team numbers were increasing. It was further clarified that contacts were not being treated in the same way as per wave 1 and 2 of the pandemic. The new structure within the team was reported upon, along with Logistical challenges. **PP22/69.3** Positively, it was confirmed that a Point of Care Testing Pilot (POCT) was commencing in Ysbyty Glan Clwyd. The Executive Director of Public Health also reported that, with the support from Welsh Government; funding confirmation was expected, which was to provide assistance to support other health protection issues accordingly. **PP22/69.4** Following a query from an IM a discussion ensued relating to pressures on staff, in relation to work commitments, if unwell. It was clarified that the HB do not have any wish to pressure staff into work if unwell, and the need to look after our staff was reiterated. It was agreed for workforce to feedback into the system, to review whether there could be further support and communications to staff. **PP22/69.5** The Chair referred to potential flu pandemic situations in future, in response the importance of immunisation was highlighted by the Executive Director of Public Health. It was understood that the Annual Flu Plan was on the Cycle of Business and was to be brought to a future meeting for update. **PP22/69.6** The Chair thanked the Executive Director of Public Health for a clear, articulate, and informative report	 SG TO

PP22/69.7 It was resolved that the Committee noted the report	
PP22/70 – Well North Wales annual report 2021/22 **PP22/70.1** The Executive Director of Public Health commenced the update by expressing thanks to Dr Glynne Roberts' who had recently retired, along with his contributions to the "Well North Wales" programme updates, specifically in relation to supporting inequalities, along with partnership working links. It was noted that the programme was within the fifth full-year, and the report highlighted the number of successful partnerships created, and how the HB had linked with organisations from across the public sector, third sector and housing providers, which had underpinned the health inequalities agenda across the region. An overview of the reports positivity was greatly acknowledged by the Committee. The Chair commended the positive impacts of the work undertaken and invited questions from the Members. The IMs acknowledged the fantastic work and key drivers within the update and a comment was discussed in relation to engagement with the public within the wider community. It was confirmed that Dr Roberts' post was going out to advert imminently. Following the discussion, the Chair thanked the Executive Director of Public Health for the update report. **PP22/70.2** The Committee approved the report and endorsed the partnership approach taken to address the issue of health inequalities across North Wales.	
PP22/71 - Planning for workforce Deep Dive **PP22/71.1** The Executive Director of Workforce presented the report update to the Committee and stated that the detail was to set out the outline of a model methodology for Rapid Deep Dives. The report outlined how to test the methodology using problem statements relating to the challenges experienced by the HB, in relation to attraction and recruitment of staff, which was to be undertaken within a forthcoming session planned in August 2022. Subject to feedback from the Committee, it was agreed to circulate and inform the Board Workshop on 4th August.	SG
PP22/71.2 It was confirmed that the Deep Dive Workshop was to be held on 18th August 2022. Discussion ensued and timescales were discussed, it was agreed that the plans were to be strengthened, prior to review at the Board Workshop. It was noted that further work was to be undertaken in relation to the workforce content, along with the addition of further details relating to problem statements. The Executive Director of Workforce agreed to participate and was to attend the Deep Dive session. It was confirmed that the session was to be led by the Transformation and Improvement team with External facilitation too.	SG
PP22/71.3 An Independent Member raised concern relating to a diary invitation for the event. It was agreed to ensure the invitations were received in due course. The Executive Director referred to a number of elements and suggestions which was to be built into the plans. It was also noted that BAF item 21 – 16 was being incorporated. A discussion ensued and suggestions raised in relation to reporting mechanisms.	SG/MM
PP22/71.4 Attendance and the presence of Independent Members (IMs) was discussed; it was noted that the Interim Board Secretary fully endorsed the attendance and	

supported the attendance of the IMs. It was agreed to involve the Chairs at the initial stage, then Independent contributions moving forwards. The make up of the group would also involve Union representation. It was agreed for the Vice Chair of PPPH and the Executive Director to agree and discuss.	NC/SG
PP22/71.5 An IM referred to a point made by Internal Audit, in relation to the governance route of the report if PPPH Members were involved, therefore the levels of independent scrutiny would require review and consideration. The Interim Board Secretary informed the group of the issues relating to visibility and mitigation, along with the requirements for clear outputs and assurance in terms of governance. The Executive Director of Workforce agreed to include detail relating to the reporting process within the document.	SG
PP22/71.6 It was agreed to complete the paper by the date of the workshop. It was agreed for the Executive Director to circulate a final version of the paper to the Members of PPPH Committee and the Acting Board Secretary. It was agreed to invite Chairs only for the initial session, which was then to be reviewed thereafter. The Chair expressed concern about being cited as an author of the report presented at PPPH without having had the opportunity to comment on the version that was published, and to ensure in the future adequate time to enable comment on final papers.	SG
PP22/71.7 The Committee noted the plan to test the proposed methodology at the session on 18th August 2022.	
PP22/72 - People (Workforce) Performance Report **PP22/72.1** The report was presented by the Executive Director of Workforce and the Committee noted that the report outlined the current workforce performance position in relation to the People Strategy 2022-2025 - Delivery Plan (Year 1 2022/2023) and the Workforce Plan 2022 /2023 (recruitment & commissioning) respectively. The interconnectivity of the Committee and the Finance, Performance and Population Health Committee reporting lines had been acknowledged, primarily relating to the recruitment levels and financial aspects.	
PP22/72.2 An IM commented upon the achievements within page 6 of the document and requested for the detail to be further structured in future reporting. Clarification around monthly profiles were also discussed.	SG
PP22/72.3 Table 1: Bridging the Gap – Actuals & Forecast; had been highlighted by an IM, with regards to links within the report relating to staffing levels and clarification requirements of Junior Drs moving along to single led employment, it was agreed to clarify outside of the meeting.	
PP22/72.4 Discussion ensued about the development of the North Wales Medical School in relation to consultation and development, patient engagement and involvement. It was noted that manual workarounds were complete to build Jnr Drs into the Electronic Reporting System. Data aspects regarding whole time equivalents had been noted with links to workforce planning and job planning utilisation. It was confirmed that Consultant contracts incorporated job planning and those with additional roles, were being built in with regards to teaching and education. Capacity, demand, and planning elements were noted. Discussion also arose with regards to recruitment, and of	

relationships with Universities.	
PP22/72.5 An IM raised concern about the process and alignment of job planning. It was noted that the Executive Director had also discussed the concern at the PFIG Committee and had acknowledged the concern.	
PP22/72.6 The Vice Chair raised a question about impacts of sickness absence and the interaction of that with the gaps identified in terms of vacancies. The Executive Director explained that there had been reference made within the report, along with non-core spend, but it was agreed to include further detail in future reporting data.	
PP22/72.7 Detail relating to gaps within bandings was discussed. It was confirmed that gaps had been detailed via talent management and skill mix programs. It was agreed that further detail on gaps by banding could be provided, along with detail on how long individuals stay in post before being promoted. Promotion and skill set was discussed and it was agreed to consider as a future deep dive, to incorporate the possibility of a review in YGC, as a core sample of a service.	SG
PP22/72.8 The Committee noted the proposals confirming the position and forecast in detail. It was agreed that further reports were to include the analysis tracking method against trajectories; therefore, the Committee noted the performance position provided, and agreed the future reporting format.	SG
SIGNIFICANT REPORTING	
PP22/74 - Medical and Health Sciences school progress update	
PP22/74.1 The Executive Medical Director presented the paper highlighting the progress to date with regards to the establishment of the North Wales School of Medical and Health Sciences. The alignment to governance was acknowledged. It was confirmed that a Gap analysis was under way and it was recognised that Capital issues in relation to investment was to be taken within a separate forum.	
PP22/74.2 The Vice Chair questioned the timing of a formal paper being taken to Board. It was confirmed that the timeframe was yet to be agreed. It was reported that a gap analysis was being undertaken, prior to Board review. A discussion also arose regarding main risks, as noted within section 4 of the report, along with formal managing mechanisms.	
PP22/74.3 An IM raised a question with regards to possibilities of reductions and prioritisation of placements against current trajectories, along with impacts of longer-term outputs. A discussion ensued, it was noted that the prioritisation of placements were being reviewed, and the location of residing placements were being considered, work was ongoing.	
PP22/74.4 The Committee noted the update provided and it was agreed that a paper was to be taken to a future HM Meeting once clarification on capital issues were formalised. It was noted that the risk register for the development was to be brought to a future meeting.	NL

GOVERNANCE	
PP22/75 - Chairs Assurance Reports from Strategic and Tactical Delivery Groups **PP22/75.1** Together 4 Mental Health Partnership Board (T4MHPB) - It was resolved that the Committee noted the report provided within the Agenda pack and the verbal overview. **PP22/75.2** Population Health Group - (TO) - Verbal update provided. The history of the evolution of the Group was provided. It was recognised that the Team were working through the Terms of Reference. The Committee noted the verbal update provided. **PP22/75.3** Executive Delivery Group – Transformation – It was resolved that the Committee noted the report provided and the verbal overview provided.	
PP22/76 - Partnership Meetings **PP22/76.1 Regional Partnership Board update** The Head of Regional Collaboration and the Assistant Director of Health Strategy provided the update to the Committee on the work programme of the Regional Partnership Board. The minutes of recent meetings had been provided to the Committee to note. The paper also included an update on the Regional Integration Fund. The focus on key areas were commented upon, including a transfusion fund update which outlined the proposals. It was recognised that agreed models of care within 7 areas had been submitted to Welsh Government. **PP22/76.2** An IM raised a question relating to the budgetary and financial implications referring to a RIF. It was confirmed that proposals and funding elements were being worked through to understand any impact upon the HB. **PP22/76.3** It was resolved that the Committee noted the update.	
RISK	
PP22/77 - Corporate Risk Register **PP22/77.1** The Assistant Director of Information Governance and Risk joined the meeting to present the update, clarifying a technical issue with the paperwork submitted which had been resolved. **PP22/77.2** It was reported that the Risk Management Group met on the 5th April and 31st May 2022, further updates to the risks had been incorporated. The Committee had been provided with individual progress notes on the risk paper presented. **PP22/77.3** It was acknowledged that the following risk had been escalated and incorporated into the Corporate Risk Register: CRR22-24 – Potential gap in senior leadership capacity / capability during transition to the new Operating Model. **PP22/77.4** CRR20-06 – Informatics - Patient Records pan BCUHB. A significant number of updates had been provided. It was stated that the risk was being reviewed, in light of an SBAR being taken at an Executives Meeting. An IM raised a question with regards to risk scoring being in target level. It was confirmed that the item had been discussed with	

the risk lead for consistency.

PP22/77.5 Two new risks had been incorporated; CRR2220 and CRR22-21, it was flagged that the items had not been presented at Board level to date. It was noted that a check and challenge had been undertaken and actions had been identified. The appropriateness of the scoring was challenged, and a discussion arose.

PP22/77.6 CRR22-24 - It was stated that the item had been presented to the Risk Management Group for check and challenge and no questions had been raised. It was agreed that the internal processes had been completed and had moved forwards. It was confirmed that all internal processes for non-medical staff had been completed.

PP22/77.7 The Committee noted progress regarding the management of the Corporate Risks and of the new escalated risk aligned to the Committee.

CLOSING BUSINESS

PP22/78 - Items to Refer to other Committees

PP22/78.1 The non-delivery of the AMS.

PP22/79 Review of Risks Highlighted within the Committee

PP22/79.1 As per the Chair's Report to Board.

PP22/80 - Date of Next Meeting – 13 September 2022

The Committee Chair closed the meeting to the public and representatives of the press.