



**Strategy, Partnerships and Population Health Committee (SPPHC)
Minutes of meeting held in public on 1.10.20
via Webex**

Present:

Lyn Meadows	Independent Member (Acting Chair)
John Cunliffe	Independent Member
Jackie Hughes	Independent Member – by invitation
Lucy Reid	BCUHB Vice Chair – by invitation
Cheryl Carlisle	Independent Member / Board Champion Children – by invitation (<i>part meeting</i>)

In Attendance:

Sally Baxter	Assistant Director ~ Health Strategy (<i>part meeting</i>)
Clare Darlington	Assistant Director ~ Primary and Community Services (<i>part meeting</i>)
John Darlington	Assistant Director ~ Planning (<i>part meeting</i>)
Andrew Doughton	Wales Audit (<i>Observing</i>)
Liz Fletcher	Assistant Director ~ Children's Services West (<i>part meeting</i>)
Arpan Guha	Acting Executive Medical Director (<i>part meeting</i>)
Sue Green	Executive Director Workforce & OD
Ffion Johnstone	Area Director ~ West (<i>part meeting</i>)
Rob Nolan	Finance Director ~ Commissioning and Strategy
Gavin Macdonald	Interim Chief Operating Officer (<i>part meeting</i>)
Teresa Owen	Executive Director Public Health (<i>part meeting</i>)
Chris Stockport	Executive Director Primary and Community Services
Mark Wilkinson	Executive Director Planning and Performance
Diane Davies	Corporate Governance Manager (Committee secretariat)

Agenda item discussed	Action by
SP20/56 Chair's welcome and opening remarks	
SP20/56.1 The Committee Chair noted that BCUHB was unfortunately unable at the present time to accommodate attendance by members of the public at Health Board committee meetings due to Covid-19 (C19) restrictions.	
SP20/56.2 The Committee Chair advised that BCU's Socio Economic duty would be discussed at the next meeting.	MW
SP20/56.3 She invited the Assistant Director Health Strategy to provide a verbal update in relation to the EU Transition risk which would also be updated on further at the next meeting. The following was advised:	MW

<ul style="list-style-type: none"> • Risk CRR18 has been reviewed and updated to reflect the current position, which is that the end of the period for reaching agreement on a trade deal is closing in, and if no agreement is reached, the country be subject to WTO arrangements. The European Council was due to meet on 15-16 October and the UK had previously said this was the deadline for presentation of a deal. Clearly negotiations are still ongoing • Welsh Government (WG) had re-established the national Senior Responsible Officers' forum and refreshed the overall infrastructure working towards contingency plans. • BCU group had been re-established to review risks and contingency measures put in place previously • Procurement leads were working closely with WG to review arrangements, particularly in light of demand on supplies arising from the Covid19 pandemic • The North Wales LRF Strategic Co-ordinating Group were reconvening early October to refresh the partnership response. • Whilst the risk level has been reviewed it was suggested that the level of risk be increased in view of the short timeframe and current failure to reach a deal, plus potential impact of Covid on supplies, medicines, consumables. 	
<p>SP20/57 Apologies for absence</p> <p>Apologies were noted from Helen Wilkinson, Nicky Callow and Adrian Thomas re item SP20/68</p>	
<p>SP20/58 Declarations of interest</p> <p>None received</p>	
<p>SP20/59 Draft minutes of the meeting held on 9.6.20 for accuracy, matters arising and summary action plan</p> <p>SP20/59.1 The minutes were agreed as an accurate record and there were no matters arising.</p> <p>SP20/59.2 The summary action log was updated and in the ensuing discussion the following was noted:</p> <p>SP20/10 The Committee raised concern in deferring consideration of the Estates Strategy until the new financial year.</p> <p>SP20/39 The Executive Director of Planning and Performance advised that potential alternative plans in respect of the Ablett Unit were scheduled to be discussed at the Audit Committee and Finance and Performance Committee.</p> <p>SP20/42 The Committee requested</p> <ul style="list-style-type: none"> • to be advised when Board members would discuss BCU's Dementia Strategy 	<p>TO</p>

<ul style="list-style-type: none"> that the Interim Director of Governance give consideration to partnership governance arrangements whilst undertaking BCU's governance review. 	
<p>SP20/60 Operational Plan monitoring 2020/21</p> <p>The Committee questioned the RAG rating applied to AN9.1 which was confirmed to be green. The Committee Chair reported that the monitoring plan had been discussed at the Board meeting on 24.9.20.</p> <p>It was resolved that the Committee noted the report</p>	
<p>SP20/61 Plans to support Quarters 3/4 SP20/61.1 Draft Winter Resilience Plan 2020/21</p> <p>SP20/61.1.1 The Interim Chief Operating Officer presented this item. He outlined the background and challenges ahead in planning for a winter with the addition of addressing Covid19. The working draft of the plan would require further refinement and it was noted that it was supported by 3 underlying health economy plans developed with Area teams, secondary care and Welsh Ambulance Trust (WAST). He advised that learning from the previous winter and Covid19 (control centres, responses, critical care) had been taken into account as well as consideration around IT usage, workforce and communications. The Interim Chief Operating Officer drew attention to the development of clear outcome measures with the intention to prevent harm. Demand and Capacity was outlined in the report in which he highlighted the need to address availability of 152 unfunded beds to fill gaps across the Health Board. Standing down elective operations would not be an option during the period due to the need to continue essential services. It was noted that the plan also contained detail in relation to temporary hospitals, critical care capacity & workforce, respiratory medicine, pathology, Test, Track & Trace as well as Mental Health. In respect of site escalation processes a separate piece of work was being undertaken which would be 'live' piloted the following week, developing schemes on a prioritisation basis to mitigate the bed gap were also being worked on.</p> <p>SP20/61.1.2 The Interim Chief Operating Officer reported that the next steps would be to undertake a financial assessment and address workforce requirements before seeking Board approval. In the discussion which ensued it was agreed the Interim COO would address Mental Health (MH) beds in this area, linking in with the Interim MH Director, as well as providing further detail in the plan on staff wellbeing and diagnostics. Further discussion on Personal Protective Equipment (PPE) would be followed up following the meeting with Independent Member Jackie Hughes. In relation to the Committee's questions relating to bed level planning, the Executive Director Planning and Performance advised that further discussion would be needed with the Executive Director of Primary and Community services in this area should a greater peak evolve earlier than the Swansea model explained in order to update the demand and capacity modelling.</p> <p>SP20/61.1.3 The Vice Chair questioned confidence levels given current issues with ambulance handovers, which the Interim COO agreed would require further grip and</p>	

<p>control, especially within the Ysbyty Glan Clwyd to strengthen processes. He advised that use of the Enfys hospitals was becoming a real option. She emphasised the importance of also factoring in patients with dementia and BCU's elderly population and their impact on primary, community and acute services. The Executive Director of Public Health concurred and emphasised the need to work with partner organisations to ensure alignment with health and social care.</p> <p>SP20/61.1.4 The Finance Director – Commissioning and Strategy advised that notification had been advised that £83m had been made available by WG, however the detail of the workstreams this was to be apportioned to was being worked on.</p> <p>SP20/61.1.5 The Committee Chair reflected on the position of scheme development in comparison to the previous year, following discussion it was agreed that the supporting area plans also be shared with members on request. It was understood that it was currently unknown whether 75 schemes would be financed in the current year, however the Executive Director Planning and Performance advised that activity modelling would be redone dependent on affordability and decisions taken on individual schemes.</p> <p>SP20/61.1.6 The Vice Chair voiced her concern regarding affordability as the plan was not currently costed, albeit that the Finance Division was heavily focussed on this work. She also questioned the position for partners and it was confirmed that good cross party working was being undertaken and finances worked up, especially in relation to Health and Social Care plans. The Committee also raised concern in respect of a potential gap in relation to the assumptions put forward.</p> <p>SP20/61.1.7 The Executive Director of Planning and Performance agreed to take forward the feedback provided by the Committee in respect of areas needing further clarity ie diagnostics, mental health, bed capacity, demand modelling update, schemes and timescales in future iterations. The Committee Chair requested that further discussion take place on assumptions in the Board Workshop scheduled to take place later that afternoon with other Board members.</p> <p>It was resolved that the Committee noted the work being done to strengthen delivery over winter 2020/21, alongside the Covid-19 pandemic response, which included bed capacity modelling and potential schemes developed by the health communities, in partnership with Local Authorities in order to support delivery over winter.</p> <p><i>The Assistant Director Corporate Planning joined the meeting</i></p>	
<p>SP20/61.2 North Wales local COVID-19 prevention and response plan</p> <p>SP20/61.2.1 The Assistant Director Health Strategy presented this plan which had been prepared in response to the letter from Welsh Government received on 27.7.20 and the subsequent guidance from Public Health Wales received on 29.7.20. Submission of the first draft of the Plan was required by 12.8.20. The Plan sets out how organisations in North Wales were working together in both prevention of the further spread of the Covid-19 virus and their response in the event of further outbreaks. This included clarity on the roles, responsibilities and priorities of the</p>	

<p>partners in North Wales and would support BCU's ongoing response to the pandemic. The draft plan was being developed to respond to feedback from the national Public Health Wales reviewing team and also to respond to the changing situation in respect of the incidence of Covid-19 and changing Welsh and UK guidelines. The Assistant Director Health Strategy advised that greater process clarity was provided and was being progressed taking account of other developing plans with Care Homes, Vaccination development, Test, Trace & Protect (TTP) and the return of students to Universities in North Wales.</p> <p>SP20/61.2.2 The Committee questioned to what degree PHW feedback had been taken into account, and it was acknowledged that whilst this had been undertaken, the Executive Director of Public Health reported it be initially high level guidance which would evolve going forward. It was also confirmed to the Committee Chair that safeguarding considerations had been taken into account in development, particularly in respect of TTP. The Interim Director of Governance affirmed that discussion would be taking place with the Acting Chief Executive and Executive Director of Workforce and OD in respect of BCU governance which would take into account the North Wales Prevention and Response governance structure provided.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> noted the current draft of the North Wales Plan and the work being undertaken to progress priority areas and acknowledged that revisions would be made going forward to meet the evolving situation. agreed in principle with the governance structure, subject to further executive discussion. 	
<p>SP20/61.3 Care home action plan</p> <p>SP20/61.3.1 The Executive Director of Primary and Community Services presented the care home action plan which had been reviewed by the Regional Leadership Group prior to submission to Welsh Government on 4.9.20 and retrospectively approved by the Regional Partnership Board on 11.9.20. It was noted that the Quality, Safety and Experience Committee received a paper on 28.8.20 summarising the action taken to date by the Health Board with its partners, to support care homes and also development of the North Wales care home action plan to ensure Care Homes were prepared for a potential further wave of infection. The Covid19 pandemic highlighted that there remained work to be done to improve the nature and maturity of relationships with care home providers in North Wales. It was acknowledged that the Health Board and local authorities had more to do to build effective partnerships with each other to better support the sector and this work was being taken forward.</p> <p>SP20/61.3.2 In response to the Committee, the Executive Director of Primary and Community Services confirmed that more detailed timescales were provided in supporting plans and could be made available to members if required. A discussion ensued on whether additional short term hardship funding made available to Care</p>	

<p>Homes would impact on CHC funding. It was acknowledged that this was positive news in support of Care Homes however, it was clarified that CHC fees was an ongoing issue which involved discussions with Care Forum Wales. The Executive Director of Workforce and OD stated that the approval route would be mapped with executives.</p> <p>SP20/61.3.3 The Committee acknowledged the work undertaken by the Assistant Director Primary and Community Services and extended thanks for the breadth of work previously undertaken for the Health Board in wishing her a good retirement.</p> <p>It was resolved that the Committee noted the actions taken to date to support care homes, their residents and staff during the Covid19 response and the commitments made in the regional care home action plan</p>	
<p>SP20/62 Q3 & 4 BCU Sustainable services delivery plan</p> <p>SP20/62.1 The Executive Director of Planning and Performance advised that further iterations of the plan since publication had moved forward at pace. He clarified that the high level plan was also supported by another iteration which included an accountability plan for Executives, along with core priorities which would inform the Board plan. Significant changes had been made in respect of alignment of core priorities with enablers to the presentation and a collective understanding around the narrative which would be clarified ahead of the Board Workshop. It was noted that there were also changes in respect of stroke services and actions in regard to Covid19 and also integrated governance.</p> <p>SP20/62.2 The Committee reviewed the plan. Members raised queries on overall deliverability and the Vice Chair questioned whether the key outcomes were too high level and did not provide sufficient SMART indicators. In consideration of individual actions, it was agreed that the Lead for the review of Psychology support for the adult diabetes service business case be reflected as the Executive Director of Primary and Community services. The Executive Director of Planning and Performance explained the review of the Orthopaedic business case given the feasibility work being undertaken in regard to Diagnostic Treatment Centre development. The Committee reflected on the level of granularity required in order to ensure a meaningful shared understanding of the plans provided and questioned whether there was sufficient time to draw this together. It was considered important that the Executive Team brought a narrative together that articulated the core priorities and actions required over the next 6 months to feedback to the Committee. The Executive Director Workforce and OD shared Executive team discussion in respect of the Board level strategic plan, organisational level planning and alignment to strategic priorities. Mindful of the timescales involved she stated that it would be important to incorporate the Committee's feedback and ensure this could be discussed further at the next Board Workshop. In response to the Committee, the submission date to WG was confirmed as 16.10.20.</p> <p>SP20/62.3 The Executive Director of Planning and Performance summarised that the Committee's feedback would be incorporated into the development of the plan. This would include consideration of affordability, smart actions/outcomes, level of</p>	

<p>outcomes, more specificity in respect of reviews, additional narrative work, alignment with BCU's core priorities, consideration of the level of detail provided and Board assurance. He commented on the iterative process of the plan.</p> <p>It was resolved that the Committee</p> <p>noted the draft Q3/4 summary plan and provided feedback to the plan ahead of presenting to the Health Board in October.</p>	
<p>SP20/63 Digitally enabled clinical services strategy</p> <p>SP20/63.1 The Acting Executive Medical Director provided a presentation which outlined the BCU intention to develop a sustainable clinical plan and the necessary enablers to achieve this. He shared the learning from Hywel Dda's clinical strategy in respect of the principles involved and also acknowledged that the development of the North Wales medical school would also need to be incorporated. The substantial activity of the Clinical Advisory Group to 11.9.20 was outlined including addressing the enormous amount of clinical pathways within BCU. He commented that effective clinical engagement could be achieved with visioning and the right messaging.</p> <p>SP20/63.2 The Committee discussed their concern that there appeared to be a separation from the previously 'digitally enabled' strategy development. It was confirmed by the Acting Executive Medical Director that digital needs would be dealt within in the 3D stage (Design) as it was a crucial to clinical effectiveness and monitoring. The Executive Director Primary and Community services affirmed the Digital strategy would be embedded. The 6 principles of digital working were also outlined within the presentation.</p> <p>SP20/63.3 The 3D stages of Discover, Design and Deliver were further outlined in the presentation along with the 4 focus areas of strengthened digital foundation, active Patient/Carer, Connected staff and digital organisation. The 4 key challenges were noted to be in respect of population, pace of change & increasing demand, reducing finances & increasing short term funding as well as working together.</p> <p>SP20/63.4 The Committee was pleased to receive the update on the strategic roadmap ahead and emphasised the fundamental need to ensure clinician ownership throughout.</p> <p>It was resolved that the Committee</p> <p>noted the presentation</p>	
<p><i>The next item was taken out of sequence for operational need</i></p> <p>SP20/67 Test, Track and Protect (TTP) update</p> <p>SP20/67.1 The Executive Director of Public Health presented this item. The report set out current updates in respect of Governance and the formation of a TTP Strategic Oversight Group which would report into the SPPH Committee on updates provided to the North Wales Recovery Coordination Group and Welsh Government. The Terms of Reference were provided for approval. In addition, testing updates were provided in</p>	

<p>antigen test, mass testing units, mobile testing units, local testing sites and antibody testing. It was noted that cases were rising and there was a focus on ensuring capacity, including moving forward recruitment. In respect of Contact Tracing it was noted that local tier permanent staff recruitment was being moved forward by Flintshire Local Authority. The impact of greater movement which had lead to higher ratio of contacts was noted. A well received workshop had been attended by a large number of partner organisations in relation to Protection.</p> <p>SP20/67.2 Details were provided of a regional planning approach which would be functional within 2 weeks. In discussion of IT support it was noted that a local dashboard, supported by BCU IT, was working well and available for members to view if wished. The TTP governance structure and role of the regional hub outlined within the appendices were noted.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> • noted the status of the multiagency response programme for the North Wales TTP Programme. • noted the summary of achievements during the start-up of the tracing service through the Regional Planning Group • Approved the TTP Strategic Oversight Group Terms of Reference <p><i>The Executive Director of Public Health left the meeting</i></p>	
<p>SP20/64 Business Continuity planning and emergency preparedness</p> <p>SP20/64.1 The Executive Director Planning and Performance introduced this item, he clarified that the Civil Contingencies Group, indicated in the paper, reported to the Committee and that there was a recognition that capacity in this area of the organisation required strengthening. He invited the Assistant Director Corporate Planning to present the report.</p> <p>SP20/64.2 It was noted that the organisation had dealt with many areas of external pressure over the past 12 months in addition to the Covid19 pandemic such as adverse weather, cyber attacks and exit from the European Union. He advised that many areas of the 2019/20 work programme had needed to be put on hold to focus on support to the Covid19 pandemic response. The Assistant Director Corporate Planning stated that progress on business continuity management could be improved with additional capacity in operational planning.</p> <p>SP20/64.3 In response to the Committee, the Assistant Director Corporate Planning undertook to provide a position update on review of BCU’s Business Continuity policy and ensure the Committee’s inclusion within the consultation stage. He also undertook to provide an update on how the gap in service area business continuity plans would be addressed to the next meeting. In discussion of the the role and membership of the Civil Contingencies Group, it was agreed that further detail of the Policies group also be provided.</p> <p>SP20/64.4 In respect of the additional capacity outlined within the paper, the Committee were supportive of additional capacity building within this area, however it</p>	

<p>would be for Executive team discussion on how this would be implemented operationally.</p> <p>SP20/64.5 In respect of the Internal Audit Business Continuity report which was due for completion by the end of December 2020, the Assistant Director Corporate Planning undertook to provide the scope report at the next meeting.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> noted progress against BCM & EPRR guidance and 2020/21 work programme. approved the 2020/21 CCG Work Programme supported in principle the recommendation to strengthen overall EPRR capacity and capability to manage training, exercising, planning and response arrangements going forward 	<p>JD</p>
<p>SP20/64.1 Business Continuity lessons learned in Covid19 response to date</p> <p>SP20/64.1 The Executive Director Planning and Performance advised that a debriefing programme had been undertaken following the first wave of the Covid19 response. Areas of good practice and areas for improvement were outlined in the report as well as an action plan which set out responsible lead directors and timescales.</p> <p>SP20/64.2 In response to the Committee, assurance was given that the Executive Team monitored the action plan. The Executive Director Planning and Performance also confirmed that the most important lessons learned were incorporated and that timescales would be brought forward should a second wave occur earlier than anticipated. He agreed that lessons learned on Information Governance would also be included in the next iteration.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> received the report and considered the draft findings. approved the actions identified within the report to ensure improved management arrangements going forward. 	
<p><i>The Assistant Director Children's services West and Independent Member Cheryl Carlisle joined for this item.</i></p> <p>SP20/65 Children's rights approach</p> <p>SP20/65.1 In February 2020 the office for the Children's Commissioner for Wales delivered an introductory session to the Board based around the Principles of and becoming familiar with Children's Rights under the United Nations Convention on the Rights of the Child (UNCRC). This was the start of an initiative to embed the principles of Children's Rights within BCUHB which the Board requested the Committee to follow up.</p> <p>SP20/65.2 The Assistant Director Children's Services reported on the Board's positive position. It was understood that that whilst Children's services provided a lead, it was the Health Board's intended approach that children's issues be embedded as</p>	

<p>everyone's business across the Health Board. The pledges outlined to the Children's Commissioner were noted to be</p> <ul style="list-style-type: none"> • To take lessons from the seminar from other health boards regarding their progress with embedding Children's Rights into their core activity; • To develop a plan for embedding a Children's Rights Approach within BCUHB; • To organise staff training sessions supported by the office for the Children's Commissioner for Wales (CCfW). <p>SP20/65.3 It was noted that due to the Covid19 pandemic response, training rollout had been delayed, however a working group was in place and moving forward the agenda. The Committee questioned whether the training could also encompass how this approach would be made in practice. Discussion ensued on the promotion of Children's Rights and that the greater acceptance of using virtual platforms provided greater opportunities for representation of children across the rurality of the Health Board into the future. This would also include the potential for a Forum/Committee for children so that their voice might be heard within the Health Board as they utilised many of BCU's services.</p> <p>SP20/65.4 The Independent Member Cheryl Carlisle, Board Champion for Children endorsed the message to fellow Board members that Children's services should be considered in the same manner as safeguarding ie embedded within all portfolios. The Committee concurred.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> • noted the paper • supported the continuation of a training awareness programme for staff, leading to the development of an action plan to ensure that children's rights are prioritised in all that BCU does • was supportive of embedding Children's Rights within the portfolios of all Executive Directors • agreed that risks be further considered outside the meeting <p><i>The Assistant Director Children's services West and Independent Member Cheryl Carlisle left the meeting</i></p>	<p>LF/CS</p>
<p><i>The Assistant Director Community and Primary Care Services joined the meeting</i></p> <p>SP20/66 Strategic Programme for Primary Care</p> <p>SP20/65.1 The Assistant Director Community and Primary Care Services presented this item, she confirmed that primary care items had now been incorporated into the Committee Cycle of Business going forward as agreed at previous meetings. She advised that the strategic programme also included community care. It was noted that the strategic NHS Wales Framework had been introduced the previous week which would include several milestones and actions that had been included within the Q3/4 plan.</p>	

<p>SP20/65.2 The Executive Director Primary and Community services pointed out that Health Boards worked together in setting milestones and priorities. He believed that BCU needed to share work better both internally and externally as it was regularly a leader in improvement work such as GPOOH which had emerged from special measures and recognised nationally.</p> <p>SP20/65.3 In response to the Committee Chair he confirmed that plans were in hand to present cluster work to the Committee going forward, as in previous workshop sessions. The Vice Chair stated that having a clearer national delivery framework provided better direction in order to move forward support as a whole system with better integration and providing resilience in relation to risks.</p> <p>SP20/65.4 It was noted that the next priorities would be to address accountability on achievement of delivery milestones, cluster plans and the framework. It was envisaged that progress of the strategic programme would be reported through to the SPPH Committee and that other appropriate reposting would be provided to the Quality, Safety and Experience Committee in relation to safety risks and also the Finance and Performance Committee in relation to performance.</p> <p>SP20/65.5 The Assistant Director Primary and Community services also advised that a Programme Board for the roll out of the full 111 service in North Wales would be established in the near future.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> • noted the work to date of the all Wales Strategic programme for primary care, and the outputs delivered • noted the alignment required with the Health Board's strategic and operational plans 	
<p>SP20/68 Joint update on Covid19 Research and Innovation (R&I) 13.8.20-21.9.20 It was resolved that the Committee noted the update</p>	
<p>SP20/69 Engagement update The Committee Chair complimented the department on the progress outlined It was resolved that the Committee noted the update</p>	
<p>SP20/70 Policies and procedures WP8 Equality, Diversity and Human Rights Policy and WP7 Procedure for Equality Impact Assessment It was resolved that the Committee noted that the policies had been approved by the Committee Chair following the Committee meeting held on 13.8.20</p>	
<p>SP20/71 Issues of significance to inform the Chair's assurance report To be advised</p>	
<p>SP20/72 Date of next meeting 10.12.20</p>	