



**Strategy, Partnerships and Population Health Committee (SPPHC)  
Minutes of meeting held in public on 3.12.19  
in the Boardroom, Carlton Court**

**Present:**

Mrs Lyn Meadows	Independent Member (Acting Chair)
Mrs Jackie Hughes	Independent Member
Cllr Medwyn Hughes	Independent Member

**In Attendance:**

Mr John Darlington	Assistant Director ~ Corporate Planning ( <i>part meeting</i> )
Mrs Kate Dunn	Head of Corporate Affairs
Dr David Fearnley	Executive Medical Director ( <i>part meeting</i> )
Mrs Ffion Johnstone	Area Director : West ( <i>part meeting</i> )
Mr Rob Nolan	Finance Director ~ Commissioning & Strategy
Mr Lawrence Osgood	Associate Director of Workforce Performance & Improvement ( <i>for Mrs S Green</i> )
Miss Teresa Owen	Executive Director of Public Health
Dr Chris Stockport	Executive Director of Primary & Community Services
Mr Mark Wilkinson	Executive Director Planning and Performance
Mr Dylan Williams	Chief Information Officer ( <i>part meeting</i> )

<b>Agenda Item Discussed</b>	<b>Action By</b>
<p><b>SP19/106 Apologies for Absence</b></p> <p>Received for Mrs Helen Wilkinson and Mrs Sue Green</p>	
<p><b>SP19/107 Declarations of Interest</b></p> <p>None raised.</p>	
<p><b>SP19/108 Draft minutes of the meeting held on 1.10.19 for accuracy, matters arising and summary action plan</b></p> <p>The minutes were agreed as an accurate record, and updates were provided against the summary action log.</p>	
<p><b>SP19/109 Review of the Committee's allocated risks extracted from the Corporate Risk Register</b></p>	

<p><b>SP19/109.1</b> The Executive Director of Planning and Performance presented the paper and asked members to consider if they were happy with the scores and actions as described. A discussion ensued:</p>	
<p><b>SP19/109.2 CRR01 Population Health</b> The Executive Director of Public Health reported there was currently no indication of a need to change the scoring and that the risk would be further reviewed as part of planning processes. The Committee accepted the current risk scores and mitigating actions as presented.</p>	
<p><b>SP19/109.3 CRR09 Primary Care Sustainability</b> The Executive Director of Primary and Community Services reported that many of the improvement actions were long term hence the score would not be liable to change quickly. He was content that the actions were appropriate and sufficient to manage any potential deterioration. The Committee accepted the current risk scores and mitigating actions as presented.</p>	
<p><b>SP19/109.4 CRR14 Staff Engagement</b> It was noted that whilst the accompanying summary report indicated the current and target risk scores had been reduced since the last review, the detail against the risk itself stated there had been no change since presented to Board in November 2019. This would be clarified urgently. Notwithstanding this contradiction, members were assured that a range of improvement actions were in place and on track but had not yet fully delivered results and outcomes. A member queried the listing of 'IWantGreatCare' as an assurance as she was of the view that this was no longer being utilised across BCU. This would be clarified. A comment was also made that the implications of the nurse rostering issue may well impact adversely on staff engagement and morale.</p>	<p>LO (SG)</p> <p>LO (SG)</p>
<p><b>SP19/109.5 CRR15 Recruitment and Retention</b> It was noted that the current risk scores remained unchanged and that the risk was being addressed through substantial retention plans both at divisional and organisational level. It was reported that a new Head of Resourcing had been appointed and that current vacancy rates were overall acceptable, with Nursing and Midwifery on the right trajectory. The question was raised whether changes in the Trac system would impact upon this and the Associate Director of Workforce Performance &amp; Improvement would discuss this further outside of the meeting with Mrs J Hughes. The Committee accepted the current risk scores and mitigating actions as presented.</p>	<p>LO</p>
<p><b>SP19/109.6 CRR17 Development of an IMTP</b> The Executive Director of Planning and Performance indicated this was a long-standing risk which remained a significant challenge for the Board. He reported that actions would be further considered in the later Committee Workshop session and also at the Board Workshop on the 5.12.19. He reminded members that the financial position and the organisation's ability to deliver timely access to planned care were significant issues that would affect the Board's ability to meet the target score. The Committee accepted the current risk scores and mitigating actions as presented.</p>	

<p><b>SP19/109.7 CRR18 EU Exit – Transition Arrangements</b></p> <p>The Executive Director of Planning and Performance indicated this was a recently added risk and was distinctly separate to broader issues for healthcare as a result of potentially leaving the EU which were outside of the Board’s direct ability to manage, although clearly we will seek to influence. It was noted that whilst the accompanying summary report indicated the current and target risk scores had been reduced since the last review, the detail against the risk itself stated there had been no change since presented to Board in November 2019. This would be clarified urgently. A question was asked how BCU compared to its peers on this issue and it was reported there was no formal way to measure this but he assured members that there was a good level of joint planning in place including fortnightly calls with Welsh Government and other Boards. It was also confirmed that the impact upon care homes was taken into account. The Acting Chair suggested that the Committee review this specific risk at each meeting for the time being given the political situation.</p> <p><b>SP19/109.8 It was resolved that the Committee:</b></p> <ol style="list-style-type: none"> <li>1) Consider the relevance of the current controls;</li> <li>2) Review the actions in place and consider whether the risk scores remain appropriate for the presented risks;</li> <li>3) Approve the presented risks as set out above.</li> </ol>	<p>MW</p> <p>MW</p>
<p><b>SP19/110 Digitally Enabled Clinical Strategy</b>  <i>[Dr David Fearnley and Mr Dylan Williams joined the meeting]</i></p> <p><b>SP19/110.1</b> The Executive Medical Director reminded the Committee of the requirement to produce a strategy for clinical services and that further discussion would be held at the Board Workshop on the 5.12.19. He stated that a digital platform was a key enabler to ensuring the Board could meet Welsh Government expectations around a strategy that set out clear, evidenced-based interactions for individual conditions. He felt that if the digital strategy elements were separated out it would be more challenging to deliver the wider ambitions. A member made a point that digital solutions may be delayed where they were dependent on All Wales solutions. He also asked whether BCU was working with partners to ensure that funding opportunities were maximised. The Executive Medical Director agreed this was key, and that the Board must be clear on its direction of travel.</p> <p><b>SP19/110.2</b> The Executive Director of Primary and Community Services felt that this strategy must be taken forward via an integrated approach and there would need to be a good level of discipline in support of this. The Executive Medical Director reminded members that Living Healthier Staying Well had set out a shift towards more preventative care outside of hospitals, and that the clinical strategy needed to support this pathway. The Executive Director of Public Health indicated that the national clinical plan required a refresh and that the role of Public Health Wales in driving this needed to be more clearly understood. <i>[Mr John Darlington joined the meeting].</i></p> <p><b>SP19/110.3</b> The Audit Committee Chair recalled that the Wales Audit Office structured assessment set out their expectations for a clinical strategy which addressed issues of sustainability and affordability, and he felt that the connections needed to be carefully</p>	

<p>made with the annual plan. The Executive Director of Primary and Community Services felt that the work around the diabetes pathway and strategy was a good example of where real improvements could be made but a lack of digital solutions was preventing progress. The Acting Chair suggested that this be offered as a case study topic at the Board Workshop on 5.12.19.</p> <p><i>[Dr David Fearnley and Mr Dylan Williams left the meeting]</i></p> <p><b>SP19/110.4 It was resolved</b> that the Committee discuss the report and note it would be presented to the Board Workshop on 5.12.19.</p>	<p>DF CS</p>
<p><b>SP19/112 2019/20 Annual Plan Progress Monitoring Report (APPMR)</b></p> <p><b>SP19/112.1</b> The Acting Chair acknowledged that the APPMR needed to be scrutinized at Committee level but expressed concern that the SPPH committee was reviewing actions with ‘red’ scores which were not necessarily within its remit to address. The Executive Director of Planning and Performance accepted that there were elements that were more closely related to the work of another Committee but there was a risk of a silo approach if they were all separated out. The Assistant Director of Corporate Planning reminded members that as the Committee with responsibility for setting the annual plan and strategic direction it was important that SPPH received the whole report.</p> <p><b>SP19/112.2</b> A discussion ensued around the level of detail within the APPMR and that members felt it didn’t necessarily reflect impact and outcomes. The Executive Director of Planning and Performance reminded members that further detail was available to members within the Integrated Quality Performance Report (IQPR). The Executive Director of Public Health added that each Executive Director would be assured that the level of detail was there for their respective areas. A member enquired why AP008 regarding developing a partnership plan for children with a focus on Adverse Childhood Experiences (ACEs) had remained amber for several months. It was noted there was a paper on ACEs later on the agenda, and the issue of actions remaining amber for many months had been raised by other Committees.</p> <p><b>SP19/112.3 It was resolved that</b> the Committee note the report.</p>	
<p><b>SP19/113 Review of 2020/21 Cluster Plans</b></p> <p><b>SP19/113.1</b> The Assistant Director of Corporate Planning presented the paper which provided an update in respect to the progress made in developing 2020/21 Cluster Integrated Medium Term Plans. He made reference to the earlier conversation around pathways and felt that the clusters were well placed to support this agenda. He acknowledged the significant amount of work that had been undertaken within a relatively short amount of time to prepare the draft plans by the end of September. He was of the opinion that the plans were of significant value and were well placed to meet the needs of their populations. The Assistant Director of Corporate Planning also acknowledged the work of the area teams in ensuring consistency across the plans, and noted that common areas had been drawn out within the paper together with positive feedback from Welsh Government which would be used to make further</p>	

<p>improvements. Finally he indicated that the paper highlighted some developmental work that would be required around the Integrated Medium Term Plan (IMTP) for 2020-24 and that it would be timely to take stock and identify what support the clusters needed in order to move forward. The Executive Director of Planning &amp; Performance added that the intention was to take key themes from the cluster work and determine to what extent they were reflected in the BCU-level plans to ensure a 'golden thread' was established.</p> <p><b>SP19/113.2</b> An independent member reflected that previous presentations from cluster representatives had been commendable and enthusiastic. She supported the development of Community Resource Teams (CRTs) and felt these added value. The Assistant Director of Corporate Planning indicated that CRTs were becoming more embedded and there was a need to evidence their impact on hospital admissions through the management of patients at home. Another member welcomed the paper and felt that it provided an example of partnership working at its best which would support the transformation agenda. The Acting Chair referred to a previous paper to Board regarding financial governance and enquired how these were being addressed. The Executive Director of Primary and Community Services accepted that there were issues to be addressed, some of which related to resources or funding and some around decision-making. Further discussion would be held in the later paper on the Transformation Fund.</p> <p><b>SP19/113.3 It was resolved that the Committee:</b></p> <ol style="list-style-type: none"> <li>1. Receive the report</li> <li>2. Note the progress made towards developing cluster plans for 2020/21 alongside actions to ensure key priorities are incorporated into respective health economy plans.</li> </ol>	
<p><b>SP19/114 Draft Strategic Equality Plan (SEP) 2020-24</b></p> <p><b>SP19/114.1</b> The Acting Chair noted that the draft plan had been scrutinised by the Equality and Human Rights Strategic Forum in August 2019 and the consultation draft agreed by the SPPH Committee in October 2019 prior to public consultation. She confirmed that the final draft had been amended in response to the feedback received during the consultation period.</p> <p><b>SP19/114.2 It was resolved</b> that the Committee approve the SEP and recommend to Board for final approval and publication.</p>	
<p><b>SP19/115 Regional Partnership Board (RPB) Update</b></p> <p><b>SP19/115.1</b> The Executive Director of Planning &amp; Performance presented the paper which provided an update on progress within the RPB work programme via the submission of the RPB minutes. He indicated that the previous meeting had focused on transformation work, and the RPB had received a presentation on digital solutions which had highlighted the importance of partnership focus.</p> <p><b>SP19/115.2</b> A discussion took place regarding the equalities agenda and how it was important to ensure that links were strengthened across organisations. The Acting</p>	

<p>Chair also asked what the latest position was in terms of a Carer’s Strategy for BCUHB and how this linked to any regional plans. It was agreed that a position statement be provided including where the latest strategy was available from.</p> <p><i>[Mrs Ffion Johnstone joined the meeting]</i></p> <p><b>SP19/115.3 It was resolved that</b> the Committee receive the update from the North Wales Regional Partnership Board</p>	<p>TO</p>
<p><b>SP19/116 Transformation Fund Update : Community Services update</b></p> <p><b>SP19/116.1</b> The Executive Director of Primary and Community Services presented the paper which provided members with a progress update on the Community Services Transformation programme across North Wales. The report outlined the work undertaken since the last report in September 2019 and detailed the actions to be undertaken in the next quarter. He acknowledged what a significant and challenging piece of work this was for the Health Board, but that it was now far clearer as to what key performance indicators would need to look like, and that an evaluation approach was in place. In terms of the multi-disciplinary teams (MDTs) he indicated that there was a framework set out for their maturity and pace setter funding was agreed for many of them. He did feel there was a need for an improved primary care focus within the IQPR. Overall the Executive Director of Primary and Community Services felt that the key issue for the clusters was their maturity and he suggested that they needed to be tested with different levels of autonomy which in return should see a level of increased flexibility.</p> <p><b>SP19/116.2</b> A discussion ensued. The Executive Director of Planning and Performance referred to an earlier discussion around financial governance and that the plan for next year should include a financial strategy section picking up issues such as zero based budgets and moving money across the organisation. The Executive Director of Primary and Community Services suggested there was a need to look at the whole pathway agenda and to move away from over investing in the secondary care arena. The Executive Director of Public Health agreed that the organisation needed a mature discussion as an integrated board. The Finance Director for Commissioning and Strategy supported this direction of travel but indicated that appropriate business case processes would need to be available to support this. The Area Director (West) suggested that a pathway where there is variation in practice be identified (such as diabetes) and the social model be applied to it. Members were supportive of this suggestion and the Executive Director of Planning and Performance undertook to take the idea through the Executive Team in order to develop a proposal for the Committee to consider at the next meeting.</p> <p><b>SP19/116.3</b> The Acting Chair then referred to Appendix 1 on design principles for North Wales and welcomed what she felt was a clever design which provided an excellent summary of where the organisation should be heading, but wondered whether it was deliverable. The Executive Director of Primary and Community Services was of the view that all of the content was possible and that the teams had signed up to the direction of travel, but the challenge would as ever be around</p>	<p>MW</p>

<p>capacity. Another member welcomed the document which she felt would be a useful template for other services.</p> <p><b>SP19/116.4</b> In terms of risks the Executive Director of Primary and Community Services confirmed that £6m of transformation monies would come to an end but it had always been made clear that this was to be used to facilitate change and to support the existing workforce to manage it. He was comfortable that the organisation was currently managing the risk. The Executive Director of Public Health stated that similar conversations were held within the Regional Partnership Board and it was key to ensure the finance was allocated and managed appropriately.</p> <p><b>SP19/116.5</b> The Acting Chair suggested that the transformation and community services agenda would be a useful topic for a future board workshop discussion. She would flag this within her Chair's report to Board.</p> <p><b>SP19/116.6</b> <b>It was resolved that</b> the Committee to note the information contained within the report by way of progress with the Community Services Transformation Fund.</p>	LM
<p><b>SP19/117 Public Service Boards (PSBs) Gwynedd &amp; Anglesey</b></p> <p><b>SP19/117.1</b> The Area Director (West) presented the report which updated members on developments and implementation of the Gwynedd and Anglesey Well-Being Plan and the implications for the Health Board. She set out two key objectives - firstly to ensure communities thrived and were prosperous in the long-term and secondly to ensure that residents were healthy and independent with a good quality of life. She indicated that the PSBs were prioritising a range of actions to deliver these objectives and that the paper set out the focus of a range of sub-groups that had been established in the areas of Welsh Language, climate change, homes for local people, poverty, health and care of adults and the welfare and achievement of children and young people. The Area Director (West) went onto draw members' attention to the establishment of an Integrated Health and Social Care Group for Gwynedd and Anglesey which aimed to take the RPB transformation project to a local level to ensure delivery.</p> <p><b>SP19/117.2</b> The Acting Chair noted that the report of a Wales Audit Office review into PSBs would be considered by the Regional Partnership Board at its next meeting. The Area Director (West) would ensure that the SPPH Committee was sighted on any implications from those recommendations. A member suggested that the frequency of the PSB updates to the Committee was not consistent and may be too frequent. It was agreed that this be reviewed to ensure reporting was most timely and appropriate.</p> <p><b>SP19/117.3</b> <b>It was resolved that</b> the Committee note the update and current progress made by the Gwynedd &amp; Anglesey Public Service Board.</p> <p><i>[Mrs Ffion Johnstone left the meeting]</i></p>	MW

<p><b>SP19/118 Update on Alcohol Strategies in BCUHB</b></p> <p><b>SP19/118.1</b> The Executive Director of Public Health presented the paper which provided an update on strategic alcohol and related Area Planning Board (APB) activity. She drew attention to a change within the Public Health Act of 2018 in terms of minimum unit prices for alcohol, and that a new substance misuse needs assessment had been undertaken with a series of recommendations to be taken forward with partners. Members’ attention was drawn to the harm reduction strategy which was now progressing and that a useful workshop had been held in November. Finally the Executive Director of Public Health referred to licensing work and confirmed that whilst there was a process in place, the local data was not available that would really make a difference. The Board would continue to explore the opportunities to ensure it had a positive impact on licensing applications.</p> <p><b>SP19/118.2 It was resolved that</b> the Committee:</p> <ol style="list-style-type: none"> <li>1. Note the opportunities contained in the recommendations of the Substance Misuse Needs Assessment.</li> <li>2. Note the opportunities for addressing the harms of alcohol misuse through the North Wales Alcohol Harm Reduction Strategy and Delivery Plan on its release.</li> <li>3. Endorse the approach being taken to develop a regional ‘Alcohol Harm Reduction Strategy and Action Plan’ and to further develop the alcohol licensing process and administration.</li> </ol>	
<p><b>SP19/119 Update on the work on the Adverse Childhood Experiences (ACE) agenda</b></p> <p><b>SP19/119.1</b> The Executive Director of Public Health presented the paper which provided an update position on a paper previously received by the Committee. The Assistant Director of Corporate Planning enquired as to the funding situation with the ACE and EAT (Early Action Together) programmes and it was noted that the ACE work would continue but the EAT work was likely to come to an end but may be picked up through another mechanism, eg; police and crime agencies. The Executive Director of Public Health assured the Committee that there was a partnership approach to ACE but some projects were progressing faster than others.</p> <p><b>SP19/119.2 It was resolved that</b> the Committee note the progress in taking forward the ACE agenda in partnership across the region</p>	
<p><b>SP19/120 Terms of Reference Review</b></p> <p><b>SP19/120.1</b> The Executive Director of Planning and Performance indicated that the previous Committee Chair had wished to see a higher focus on primary and community services within the SPPH terms of reference.</p>	



<p><b>SP19/120.2</b> Members were supportive of this in principle and requested that a revised draft be submitted to the next formal meeting. In addition it was noted that the Finance Director for Commissioning and Strategy should be listed as 'in attendance'.</p>	<p>MW DD</p>
<p><b>SP19/121 Summary of business considered in private session to be reported in public</b></p> <p><b>It was resolved that</b> the Committee note the report.</p>	
<p><b>SP19/122 Issues of significance to inform the Chair's assurance report</b></p> <p>To be determined by the Chair</p>	
<p><b>SP19/123 Date of Next Meeting</b></p> <p>The Committee would next meet on the 14.1.20 (private workshop session) and 4.2.20 in public</p>	
<p><b>Exclusion of Press and Public</b></p> <p><b>It was resolved that</b> 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.</p>	