



Bwrdd Iechyd Prifysgol  
Betsi Cadwaladr  
University Health Board

**Strategy, Partnerships and Population Health Committee (SPPHC)  
Minutes of meeting held on 2.4.19  
in the Boardroom, Ysbyty Gwynedd, Bangor**

**Present:**

Mrs Marian Wyn Jones	Independent Member (Chair)
Cllr Medwyn Hughes	Independent Member

**In Attendance:**

Ms Emma Binns	Head of Emergency Preparedness and Resilience ( <i>part meeting</i> )
Mrs Ffion Johnstone	Area Director (West) ( <i>part meeting</i> )
Miss Teresa Owen	Executive Director Public Health
Mr Andy Roach	Mental Health and Learning Disability (MHL) Director ( <i>part meeting</i> )
Mrs Lesley Singleton	Assistant Director MHL – Partnerships ( <i>part meeting</i> )
Mr Mark Thornton	NW Community Health Council Chair ( <i>observer</i> )
Mr Mark Wilkinson (MW)	Executive Director Planning and Performance
Ms Diane Davies (DD)	Corporate Governance Manager ~ Committee secretariat
Welsh language team members	<i>for simultaneous translation service</i>

AGENDA ITEM	ACTION
<p><b>SP19/18 Apologies for Absence</b></p> <p>Apologies were received from Mrs Helen Wilkinson, Mrs Sue Green, Mr Rob Nolan and Dr Chris Stockport.</p>	
<p><b>SP19/19 Declaration of Interest</b></p> <p>Mrs Marian Wyn Jones declared her interest in the Research and Development Strategy item due to her position as Chair of Bangor University Council.</p>	
<p><b>SP19/20 Draft minutes of meeting held on 4.12.18 for accuracy, matters arising and review of Summary Action Log</b></p> <p>The minutes were <b>approved</b> as an accurate record and the summary action plan updated.</p> <p>It was noted that Civil Contingencies plans would be discussed at item SP19/24 and therefore the action was closed.</p>	
<p><b>SP19/21 Development of an integrated Research and Development Strategy</b></p> <p><b>SP19/21.1</b> The Executive Director of Planning and Performance advised that the Executive Director of Therapies and Health Science was the lead Executive for the</p>	

<p>development of the Strategy and the paper provided an update on current progress which was being supported by The Innovation Agency. He drew particular attention to the development timeline provided which indicated that the Strategy would be presented to the SPPH Committee in the Autumn ahead of seeking approval by the Board.</p> <p><b>SP19/21.2</b> The Committee questioned whether funding and resources would be in place to ensure the delivery of the Strategy, in confirming that the development work was on schedule, the Executive Director of Planning and Performance undertook to provide a briefing to members regarding confirmation of resources.</p> <p><b>SP19/21.3</b> The Committee questioned the absence of the lead Director to present this item and reflected disappointment in the delay in presentation to the Committee following discussion of an item regarding University Collaboration previously. The Committee felt this work to be crucial in the journey to deliver high quality care and retaining staff.</p> <p><b>SP19/21.4</b> The Committee queried the lack of definition of stakeholders and validity of European funding, noting the expectation that information needed to be provided regarding the link to the Universities in Wales. In respect of connectedness the Executive Director of Public Health confirmed that this was in place within various areas across the Health Board and emphasised the importance of the Strategy within the Health Board's work. She undertook to include the Committee's feedback to the discussion scheduled taking place at the next Executive Management Group meeting.</p> <p><b>SP19/21.5</b> The North Wales Community Health Council (NWCHC) Chair reflected that it was important for the public to appreciate how Research and Development improves care for the patient.</p> <p><b>SP19/21.6</b> Discussion ensued on positive aspects provided by patients being treated in clinical trials, improved recruitment &amp; retention and economic benefits to the community and nationally. Notwithstanding opportunities to work with partner organisations in other areas of working which were non-clinical.</p> <p><b>SP19/21.7</b> The Committee also questioned how learning was being gleaned from other University Health Boards in Wales and encouraged following up opportunities for the benefit of BCU.</p> <p><b>The Committee resolved to</b></p> <ul style="list-style-type: none"> <li>note the report</li> <li>request that the Executive Director of Planning and Performance liaise with the Executive Director of Therapies and Health Sciences to confirm date draft R&amp;D strategy will be presented to the Committee</li> <li>request that the Executive Director of Planning and Performance review the timeline to ensure realistic and ensure importance of collaboration work</li> </ul>	<p>MW</p> <p>TO</p> <p>MW</p> <p>MW</p>
<p><i>The Mental Health and Learning Disability (MHL D) Director and Assistant Director MHL D – Partnerships joined the meeting.</i></p> <p><b>SP19/22 Mental Health Strategy : Mental Health Transformation Project</b></p>	

**SP19/22.1** The Assistant Director MHLD – Partnerships described the project as an opportunity to deliver key commitments within national strategies, with the aim of a whole system approach that includes reinvestment to create a preventative model that was not solely clinical but also ensured a joined up approach, especially around individual patients. She emphasised the coproduction involved and that learning would be shared by the Community, Children’s, Learning Disability and Mental Health projects being developed. The Assistant Director MHLD – Partnerships highlighted the project summary including the challenge to move at pace with partner organisations to utilise the £2.5m investment provided from transformation funding.

**SP19/22.2** The Committee questioned to what extent would the funds being put in place (to testbed various approaches which would be up-scaled if beneficial) to help BCUHB meet Welsh Government (WG) targets for investigations and assessments. The MHLD Director advised that the deep dive undertaken had enabled a full understanding of the key issues, especially in respect of capacity & demand and resource implications.

**SP19/22.3** Following the Committee’s question regarding risk should expenditure not occur within the appropriate timescales, the Assistant Director MHLD – Partnerships pointed to challenges with partnerships and commissioning, however she believed that existing structures would mitigate this risk, albeit challenging around finance. The MHLD Director also highlighted risk appetite issues around non-recurrent funding projects and workforce reluctance in applying for temporary posts which support them. He emphasised the need for quick mobilisation. The Committee raised concern on the risk around the loss of experienced staff and how this would be mitigated.

**SP19/22.4** The Committee also questioned S136 trends and success measures. In the discussion on evaluation that ensued, work with Universities was highlighted as well as the role of the Regional Collaboration Team supporting the Regional Partnership Board. The Assistant Director MHLD – Partnerships emphasised the criticality of commissioning and that in undertaking the project, assessments could be made in respect of processes which could also be ceased if necessary.

***The Committee resolved to***

note the report including the value of the total project budget at £2.32m, progress undertaken to date and actions to be undertaken in the next phase.

**SP19/23 Learning Disabilities update: Learning Disability Transformation Project**

**SP19/23.1** The Committee Chair congratulated the Team in being the first in Wales to secure a Learning Disability Transformation project bid. The Assistant Director MHLD – Partnerships highlighted areas being developed to provide seamless health and social services for people with learning disabilities within North Wales as part of the WG transformation programme to deliver A Healthier Wales. She emphasised that there were existing areas of good practice in place, however there was an aim to improve others. The Assistant Director MHLD – Partnerships drew attention to the aim of increasing life expectancy and improving integration of general services for people with learning disabilities.

<p><b>SP19/23.2</b> The Committee questioned whom was the broker in commissioning to which the Assistant Director MHLD – Partnerships explained that the governance structure outlined within the paper provided this information, albeit that there was more work to do, including learning from the governance of other transformation projects. The Executive Director of Public Health questioned, in respect of the lifestyle change within the project summary, how improvement would be achieved.</p> <p><b>SP19/23.3</b> The Committee Chair welcomed the project which was key to inclusion of this group within the Community and looked forward to a future update.</p> <p><b><i>The Committee resolved to</i></b></p> <p>note the report including the value of the total project budget at £1.7m, progress undertaken to date and actions to be undertaken in the next phase.</p> <p><i>The Mental Health and Learning Disability (MHLD) Director and Assistant Director MHLD – Partnerships left the meeting.</i></p>	
<p><b>SP19/24 Civil Contingencies and Business Continuity draft work programme 2019/20</b></p> <p><b>SP19/24.1</b> The recently appointed Head of Emergency Preparedness and Resilience joined the meeting to present this item which set out the resilience work programme for 2019/20, building upon established organisational resilience arrangements in the delivery of duties placed upon the Health Board through the Civil Contingencies Act (2004) and associated non legislative guidance. The cycle of business demonstrated how the Civil Contingencies Group, provided assurance and governance relating to health preparedness as well as coordination of specific health economy resilience.</p> <p><b>SP19/24.2</b> She highlighted the EU transition work which had been undertaken and the potential effects on BCU in the changeable climate, particularly on workforce. The Head of Emergency Preparedness and Resilience advised the Executive Director of Public Health on progress regarding current team recruitment following her query regarding the adequacy of capacity. In discussion of the work plan, the Head of Emergency Preparedness and Resilience reminded that reasonable assurance had been assessed by an Internal Audit review. She advised that gaps regarding fuel plans and pandemic (not seasonal) ‘flu were being addressed.</p> <p><b>SP19/24.3</b> In discussion of Emergency Exercises, the Head of Emergency Preparedness and Resilience confirmed capacity and advised of plans and groups in place to deal with these. In response to the Committee, she agreed that further work was required in conjunction with BCU’s communication team in respect of increasing public awareness regarding emergency procedures utilising partners and social media.</p> <p><b><i>The Committee resolved to</i></b></p> <p>Note the report and endorsed the Civil Contingencies and Business Continuity Draft Work Programme 2019/20</p>	
<p><b>SP19/25 Third Sector Strategy update</b></p>	

<p><b>SP19/25.1</b> The Executive Director of Planning and Performance presented this item. It was noted that in 2016 the Board approved a strategic approach to partnership working with the sector and commissioning arrangements for third sector services. However, this was not progressed in depth, and required review and refresh. Work was being undertaken to review current partnership arrangements and proposals developed to build on these.</p> <p><b>SP19/25.2</b> The Executive Director of Planning and Performance highlighted the need for orientation within BCU's plan and the amplification of collaboration. He drew attention to the need for the third sector to be able to enter into the procurement process. In addition, he advised that the development approach was being undertaken as a framework as opposed to strategy. He advised that this required devolution to the Area Teams in order that this could be better managed locally.</p> <p><b>SP19/25.3</b> The Committee welcomed the update provided and in the discussion which followed it was recognised that BCU needed third sector involvement and there were opportunities for clear guidelines to be provided to ensure that all groups involved would have a shared understanding.</p> <p><b>SP19/25.4</b> The Committee commented that more 'read across' was required in respect of Area Teams and MHLD and that this development appeared to be marginal and not central to transformation. Learning from the Ockenden recommendations was also highlighted.</p> <p><b>SP19/25.5</b> The Committee emphasised that, as this Sector was crucial to much of BCU's work, the opportunity to bring together relationships with the various forms of Third Sector organisations should be progressed and requested that the finalised document should be provided at the next meeting.</p> <p><b><i>The Committee resolved to</i></b> note the update</p>	MW
<p><b>SP19/26 Wylfa Redevelopment update</b></p> <p>The Executive Director of Planning and Performance provided a verbal update. He advised that notwithstanding Horizon's current decision, the planning process would continue. He advised that a key part of the S106 agreement setting out Horizon's expectations also required that BCU set out the additional costs that would be incurred by the Health Board. <b>He reported that a draft agreement had been signed and a payment schedule agreed ie £9.6m over the lifetime of the project.</b></p> <p><b><i>The Committee resolved to</i></b> note the verbal report</p>	
<p><b>SP19/27 BCUHB governance structure for Adverse Childhood Experiences (ACES)</b></p> <p><b>SP19/27.1</b> The Executive Director of Public Health presented this item which outlined a proposed governance structure for the strategic co-ordination and planning of the</p>	

approach to Adverse Childhood Experiences (ACE) within BCUHB. The new proposed structure would also provide clear guidance to partners wishing to engage with the Health Board on the ACE agenda. It was noted that The prevention and mitigation of ACE had been identified as a partnership priority by the Part 9 Regional Partnership Board (RPB). The Executive Director of Public Health emphasised that this was a very busy area of work and, whilst advising that shared learning would take place across North Wales, she informed that regular annual updates would also be provided to the Committee going forward.

TO / DD

**SP19/27.2** The Chair noted that the effects of Adverse Childhood Experiences were well documented however, the lifelong prevention approach was not currently fully reflected within BCUHB service plans and ownership of this agenda was required across all divisions. She reflected that the new plan would help mitigate against the risk. Discussion ensued on the challenges involved in areas working together across North Wales and the national support available in which the Executive Director of Public Health raised her concern over prioritisation and monitoring.

***The Committee resolved to***

- note the evidence, which demonstrated an association between health outcomes and ACE's, as well as the significant impact on demand on health care services and ACE's across the whole life course.
- note the vital ongoing work on ACE and "First 1000 days" being taken forward in partnership by Women's and Children's services as part of the Children's Transformation Group, Regional Partnership Board and Safer Communities Board
- approve the plan for the wider strategic co-ordination and ACE planning work within the Health Board to be overseen by the Health Improvement Inequalities Transformation Group, with annual updates to the Strategy, Partnership and Population Health Committee.

**SP19/28 Reducing Smoking prevalence to improve population health**

**SP19/28.1** The Executive Director of Public Health presented this item which described the Health Board's current provision and performance of smoking cessation services. It was understood that this was a key component of the Board's Living Healthier Staying Well strategy and supported the current Board focus on unscheduled care and planned care performance, given that smoking causes approximately 5% of all adult hospital admissions.

**SP19/28.1** The Executive Director of Public Health advised that the organisation was not expected to achieve the cessation targets set, due mainly to areas of poverty to be found within North Wales.

**SP19/28.2** In addition the update informed Committee members of BCU's approach to the implementation of Smoke Free Premises and Vehicles (Wales) Regulations 2018, as required under the Public Health (Wales) Act 2017. She highlighted that the legislation applied to hospitals but not clinics and raised her concern regarding the financial obligation in respect of signage and communication with the public and staff

<p>given that legislation would be in effect from September / October 2019.</p> <p><b>SP19/28.3</b> The Committee discussed the challenges regarding tackling smoking outside hospital premises in which the Executive Director of Public Health advised that learning from Cardiff and Vale UHB's approach had taken place along with potential partnership work with local authorities. Deprivation was also discussed.</p> <p><b>SP19/28.4</b> In response to the Committee Chair's question on whether pharmacy work was sufficiently funded in respect of this work, it was noted that across North Wales there was not a one size fits all solution, and that good quality services addressing this issue needed to be consistent across pharmacies, GP surgeries and within hospitals for staff and visitors.</p> <p><b>SP19/28.5</b> The Committee questioned how the work would be moved forward, and was assured that monitoring had been improved by the establishment of a BCUHB Tobacco Control Group and that plans were in place to utilise WG funding that was expected in the Autumn. The Executive Director of Public Health confirmed that planning was incorporated within BCU's Annual Operational Plan and that the paper would be submitted to the Health Board for consideration at its next meeting.</p> <p><b><i>The Committee resolved to</i></b></p> <ul style="list-style-type: none"> <li>• note the opportunity for continued improvement against current Tier 1 performance in relation to smoking cessation and the critical importance of continued investment in smoking cessation services to reduce the burden of disease in North Wales.</li> <li>• note the service developments across the Health Board</li> <li>• endorse the approach being taken to ensure all our hospital sites become smoke free through the delivery of the Smoke Free Regulations.</li> </ul>	<p>TO</p>
<p><b>SP19/29 North Wales Regional Partnership Board update: Community Services Transformation funding briefing</b></p> <p><b>SP19/29.1</b> The Executive Director of Planning and Performance drew attention to the paper which set out the service model including funding required to scale up / roll out regionally over 3 years. He reported that the Health Board was the lead partner organisation and the Executive Director of Primary and Community services was the lead Executive. Following the successful bid, the inaugural meeting was taking place on the same day as SPPHC meeting ie 4.2.19.</p> <p><b>SP19/2.2</b> It was agreed that the Committee would receive regular updates by the Executive Director of Primary and Community services with effect from the next meeting.</p> <p><b><i>The Committee resolved to</i></b></p> <p>note the report</p>	<p>MW/CS</p>
<p><b>SP19/30 North Wales Public Service Boards update</b></p>	

**SP19/30.1** The Area Director West joined the meeting to present this item providing an update on the work of the Gwynedd and Anglesey Public Service Board. She highlighted the progress made by the four sub groups that had been established under objective 1 – Communities which thrive and are prosperous in the long term ie

- Welsh Language
- Homes for local people
- The effect of poverty on the well-being of our communities
- The effect of climate change on the well-being of our communities

In addition, it was noted that a health and care integrated group had been established to ensure effective delivery of health and care services.

**SP19/30.2** It was noted that a governance structure was outlined within the report as well as the priorities that each of the Groups needed to address. Discussion ensued on the funding position in respect of RPB and the PSBs.

**SP19/30.3** The Committee discussed bed blocking, referral systems and social workers within hospital sites. The Committee questioned how the patient experience was captured within this area. The Area Director questioned how third sector resource might be utilised within hospital wards. The Committee emphasised that there were important lessons to learn in this area.

**SP19/30.4** It was noted that the greatest challenge was organisations working together when difficult conversations around responsibilities and funding arose. The Executive Director of Planning and Performance emphasised that working together on an integrated agenda was crucial to improving performance, and whilst challenging, integration needed to be the direction of travel being undertaken. He stressed that it would be a critical role to listen to what was happening in the RPB and PSBs and then mainstream the objectives.

**SP19/30.5** The Executive Director of Public Health questioned why the Anglesey and Gwynedd PSB was no longer chaired by BCU’s Area Director as she felt this to be an important role for BCU to retain at this senior level. Discussion ensued on what shared learning could be gained from South Wales RPBs and PSBs in which the challenges around pooled budgets were noted. The Executive Director of Public Health undertook to circulate further explanatory information on the RPBs/PSBs to members following the meeting.

TO

**SP19/30.6** In response to the Committee, the Area Director West explained the next steps in utilisation of third sector resource via development of health and care support work funding.

***The Committee resolved to***

note the report

**SP19/31 Draft Committee annual report 2018/19, Terms of Reference (ToRs) and Cycle of Business (COB)**

The Terms of Reference and Cycle of Business were provided for information.



<p><b><i>The Committee resolved to</i></b></p> <ul style="list-style-type: none"> <li>• note the ToRs and COB 2019/20</li> <li>• approved chair's action could be taken to agree the final version of the draft annual Committee report for submission to the Audit Committee</li> </ul>	MWJ
<p><b>SP19/32 Issues of significance to inform Chair's Assurance Report</b></p> <p>To be confirmed following the meeting.</p>	
<p><b>SP19/33 Date of next meeting</b></p> <p>It was noted that the next meeting date would be amended to take place within the first two weeks of July – date to be confirmed.</p>	
<p><b>SP19/34 Exclusion of the Press and Public</b></p> <p>Resolution to Exclude the Press and Public</p> <p>"That 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>	