



**Strategy, Partnerships and Population Health (SPPH) Committee
Minutes of meeting held in public on 23.2.21
via Zoom**

Present:	
Lyn Meadows	Independent Member (Chair)
Nicky Callow	Independent Member (part meeting)
John Cunliffe	Independent Member
Jackie Hughes	Independent Member
Linda Tomos	Independent Member
In Attendance:	
Clare Darlington	Assistant Director Primary Care and Community Services (for item SP21/8)
Kate Dunn	Head of Corporate Affairs (for minutes)
Sue Green	Executive Director of Workforce and Organisational Development (OD)
Lynne Grundy	Associate Director Research & Innovation (for items SP21/9 and 21/10)
Arpan Guha	Acting Executive Medical Director
Wendy Hooson	Acting Head of Health Strategy and Planning (for item SP21/7)
Rob Nolan	Finance Director – Commissioning and Strategic Financial Planning
Teresa Owen	Executive Director of Public Health (part meeting)
David Poland	Audit Wales – observing
Dawn Sharp	Deputy Board Secretary (for item SP21/4)
Mark Wilkinson	Executive Director Planning and Performance

Agenda Item Discussed	Action By
<p>SP21/1 Chairs opening remarks and apologies for absence</p> <p>SP21/1.1 The Chair welcomed everyone to the meeting and indicated that as part of the prioritisation of the agenda a number of items had been listed ‘for information’ but she assured the Committee that members would have read the papers and acknowledged the importance of the matters set out within them.</p> <p>SP21/1.2 Apologies were noted for Jo Whitehead, Ffrancon Williams, Chris Stockport, Dave Harries and Andy Burgen. It was noted that adverse weather was affecting the ability of some individuals to join the meeting as hoped.</p>	
<p>SP21/2 Declarations of Interest</p> <p>None declared.</p>	
<p>SP21/3 Draft minutes of the meeting held on 10.12.20 for accuracy, matters arising and summary action log</p>	

<p>SP21.3.1 The minutes were approved as an accurate record and updates were provided against the summary action log.</p>	
<p>SP21/4 SPPHC Board Assurance Framework (BAF) Principal and Corporate Risk Report</p> <p>SP21/4.1 Dawn Sharp (Deputy Board Secretary) attended to present the report. She reminded the Committee that a revised risk management process was now in place and that refreshed BAF template processes had been supported by the Board in January. She explained that Appendix 1 set out those BAF risks which had been assigned to the SPPH Committee and that these had also been considered with Executive leads at the Executive Team meeting the previous week. She highlighted that some of the risk scores were above defined risk appetite levels and it was likely this would need to be revisited. She also noted that the production of the reports was fairly labour intensive but she hoped this would get slicker as time went on.</p> <p>SP21/4.2 A member requested that where BAF risks had been de-escalated (for example BAF20-22 and BAF20-23) it would be helpful to have this stated within the Appendix itself as well as the narrative report, as reading the Appendix alone it simply appeared that no update had been provided against those risks. Another member noted a point of accuracy that page 2 of the narrative report stated that the BAF had been approved by the Board in January, whereas it was more around the template reporting arrangements. A point was made that the target risk score should reflect the level of risk appetite and that the emphasis should be on what the organisation was willing to accept as a level of risk. The Committee agreed that further discussion at Board level on risk appetite, particularly in light of Covid, should be considered.</p> <p>SP21/4.3 In terms of presentation of data it was noted that on BAF20-07 the same colour had been applied to the target risk score of 4 and the risk appetite of 8-10. The Deputy Board Secretary would look into this in terms of ensuring consistency of application of the risk matrix. In addition a key or reminder around the definition of levels of assurance and controls would be provided in future papers.</p> <p>SP21/4.4 The Committee Chair indicated she had some detailed comments on the narrative for BAF20-07 (mental health services / effective stakeholder relationships) and she would feed this back to the Executive Director of Public Health. She also sought assurance around the capacity to deliver the actions by 30th April against BAF20-21, and the Executive Director of Workforce & OD indicated she was confident in this regard.</p> <p>SP21/4.5 In general the Committee felt there remained gaps in some areas of assurance and that there was a need to understand exactly what contribution each action would make to reducing the risk. It was suggested that when reviewing the risks, leads should consider which of the actions would have the most material impact on the risk. There was also a general comment that some risks may be more appropriately allocated to another Committee – eg; workforce optimisation to Finance & Performance Committee.</p> <p>SP21/4.6 It was resolved that the SPPH Committee:</p>	<p>DS</p> <p>DS</p> <p>DS</p> <p>LM</p>

<p>1. Review and note the progress on the Principal Risks as set out in the Board Assurance Framework (BAF); and</p> <p>2. Support a need for the Board to review the Risk Appetite Statement in the light of some of the existing target risk scores.</p> <p><i>[Dawn Sharp left the meeting]</i></p>	
<p>SP21/5 Quarter 3/4 2020/21 Operational Plan monitoring</p> <p>SP21/5.1 The Executive Director of Planning and Performance presented the monitoring report, highlighting that monitoring of actions from the operational plan was allocated out to respective Committees. In terms of those allocated to SPPH Committee he wished to highlight the success of the requirement to deliver a mass vaccination programme.</p> <p>SP21/5.2 A member noted that the report indicated that a revised business case for stroke should have been submitted by the 15th February. The Executive Director of Planning and Performance assured members that although this date had passed the business case was continuing to be developed through the organisation's governance processes. The Chair noted that more than half of the actions within the report were either red or amber and asked at what point during Q4 should this be of concern. The Executive Director of Planning and Performance reminded members that an amber rating did indicate that the Board expected to achieve what it had set out to do, albeit with a level of risk, and that this risk had been impacted upon by the further Covid waves. A member added that positives should be celebrated, and learning be taken when it had not been possible to deliver.</p> <p>SP21/5.3 It was resolved that the Committee note the report</p>	
<p>SP21/6 Development of 2021-22 plan</p> <p>SP21/6.1 The Executive Director of Planning and Performance provided a verbal update in that the Committee had held a private workshop prior to the public session at which the draft plans had been considered. Members had provided significant useful feedback which would inform the next iteration of an annual plan for 2021-22 which would then be considered by the full Board at a Workshop on 8th March.</p>	
<p>SP21/7 North Wales Dementia Strategy</p> <p><i>[Teresa Owen joined the meeting during this agenda item]</i></p> <p>SP21/7.1 Wendy Hooson (Acting Head of Health Strategy and Planning) was in attendance to present the paper to the Committee. She confirmed that the strategy had received support at the Regional Partnership Board, from the Medical Director within the Mental Health & Learning Disabilities Division and by the Executive Team. Comments that had been made, and continued to be received, would be taken on board and addressed as part of the implementation process. She indicated that the next meeting of the North Wales Dementia Strategy Steering Group was scheduled during April and that further progress updates would be provided to the SPPH Committee as required.</p>	

<p>SP21/7.2 A member enquired as to the clinical and workforce engagement in the development of the strategy, particularly for those staff groups other than medical staff. A note would be prepared and circulated in this regard. Another member suggested that the landscape for caring for people with dementia had been significantly altered due to Covid and this may impact on the implementation of the strategy. Another member raised the importance of supporting staff who were diagnosed with dementia and enabling them to stay in work as long as possible, if that was their wish. The Chair enquired as to the timescale for finalising the implementation plan and it was reported that it would be discussed further at the next Steering Group meeting. The Chair asked that following that meeting, it be circulated to Committee members and recorded as such within the action log.</p> <p>SP21/7.3 In considering the recommendation, members were keen to ensure that implementation of the strategy could go ahead but expressed a wish to ensure that assurances around clinical engagement could be strengthened in future iterations.</p> <p>It was resolved that the Committee approve the North Wales Dementia Strategy on behalf of the Board.</p> <p><i>[Wendy Hooson left the meeting]</i></p>	<p>WH</p> <p>WH</p>
<p>SP21/8 Primary Care : Cluster Development and Planning</p> <p>SP21/8.1 Clare Darlington (Assistant Director Primary Care and Community Services) was in attendance to present the paper. She drew attention to the definition of cluster working and reiterated the focus on a whole range of services within a population group. She acknowledged there was more of a focus on general medical services and made reference to the nationally agreed template for primary care integrated medium term planning. It was reported that progress against delivery milestones had been delayed as a result of the Covid-19 pandemic but that there was now a firm commitment to refresh cluster plans and accelerate recovery of service planning and provision. The Executive Director of Planning and Performance agreed there needed to be greater visibility of cluster plans within the organisation's overall planning processes.</p> <p>SP21/8.2 A member enquired as to what had changed in the current round of cluster planning and it was reported that this time there were improvements in terms of integration between practices, more proactivity, increased awareness of population need and lessons that had been learnt from Covid.</p> <p>SP21/8.2 It was resolved that the Committee:</p> <ol style="list-style-type: none"> 1. Note the requirements for the development of the Cluster Annual Plans 2021/22, set by Welsh Government; 2. Note the progress made to date in the development of the cluster plans; <p>SP21/8.3 In terms of the third recommendation regarding future reporting requirements to monitor the ongoing progress and delivery of cluster plans, the Chair felt that the SPPH Committee was not in a position to agree this as some elements would need to be</p>	

<p>monitored by other Committees. The Executive Director of Planning and Performance would take this away as an action to agree with colleagues.</p> <p><i>[Nicky Callow joined the meeting. Clare Darlington left the meeting]</i></p>	MW
<p>SP21/9 Research update and North Wales Medical School progress <i>[Lynne Grundy joined the meeting]</i></p> <p>SP21/9.1 The Executive Medical Director presented the paper and acknowledged the involvement of a range of agencies and partners in the research agenda with whom he would wish to sustain engagement in a meaningful way. He went on to highlight three main points of which he wished the Committee to be aware. Firstly the desire to embed research as everyone’s business and he gave the examples of the Community Fellows project and the Living Lab technique. He also indicated that joint appointments would be pursued. Secondly he referred to the impact of Covid-19 and that a positive outcome had been improvements in research metrics and elements of financial or economic benefits of being a high delivering research organisation. Finally he indicated that it had historically been difficult to visualise research-led successes and it was essential to appropriately monitor the research plan and to ensure the Board remained sighted on the research agenda.</p> <p>SP21/9.2 Members felt the paper provided a tangible mechanism for unlocking potential within the organisation through research and that there was a palpable improvement in this area of work. They wished to extend their thanks to the teams involved.</p> <p>SP21/9.3 It was resolved that the Committee receive the report for information</p> <p>SP21/9.4 The Executive Medical Director then went on to present the slides regarding the progress with a North Wales Medical School. He reminded members that a joint proposal had initially been presented in 2019 and he went on to highlight the benefits - most importantly those to patients and to the workforce. It was confirmed that a significant amount of preparatory work had been undertaken with stakeholders and that this would be further progressed with the establishment of a Steering Group. There were known challenges around capacity to deliver on this vision, particularly within the context of the pandemic, but the Executive Medical Director reiterated his commitment to moving forward.</p> <p>SP21/9.5 A member reported that there were similar conversations within Bangor University around the next steps with a proposal to develop a business case going to the Minister soon. She acknowledged the work was exciting but had many challenges particularly around the timeframe.</p> <p>SP21/9.6 It was resolved that the Committee receive the report for information</p>	

<p>SP21/10 Innovation and University Health Board (UHB) Status Review Update</p> <p>SP21/10.1 Lynne Grundy (Associate Director Research & Innovation) was in attendance and presented the innovation update. She drew attention to the number of people and partners that BCUHB was working with and to the examples of current projects as set out on page 4 of the paper. She commented that overall there was far more enthusiasm and people were stepping up to organise and take forward innovation projects.</p> <p>SP21/10.2 The Chair enquired how these successes would be shared and celebrated and it was confirmed that evaluation took place through the Bevan Exemplar process and that a virtual showcase of projects was planned for later in the year.</p> <p>SP21/10.3 It was resolved that the Committee receive the update for information</p> <p>SP21/10.4 The Associate Director Research and Innovation then went on to present the University Health Board status review paper, confirming this latest review had been retrospective. She confirmed that new criteria would be applied from April 2021.</p> <p>SP21/10.5 A member indicated she had seen an early draft of the review report which would be considered at the expert panel assessment on 29th March and she suggested it would be prudent for other Committee members to have sight of this draft. Another member noted reference to future university reviews being incorporated into the planning framework and IMTP process and he suggested that given IMTPs had been suspended there would be a need to consider how monitoring would take place.</p> <p>SP21/10.6 It was resolved that the Committee receive the update for information</p> <p><i>[Lynne Grundy left the meeting]</i></p>	<p>MW NC</p>
<p>SP21/11 Update on the implementation of Smoke Free Premises and Vehicles (Wales) Regulation 2020</p> <p>SP21/11.1 The Executive Director of Public Health presented the paper and was pleased to be able to report that smoke free legislation continued to be strengthened and moved forward. She indicated that this latest legislation would put more of an onus on the organisation in terms of responsibility of its actions. Due to the ongoing pandemic a ‘soft’ launch was planned and colleagues were working on key areas including signage and policy. She highlighted the recommendation around not providing designated smoking areas on hospital sites and confirmed that this was supported by Executive Team colleagues.</p> <p>SP21/11.2 A member recalled the amount of work and negotiation it had taken to remove designated smoking areas and shelters over many years and felt that as policies were now geared towards ensuring smoke free sites including grounds a return to their provision</p>	

<p>would be counter intuitive. She and other members expressed concern that enforcement of the legislation would be a significant challenge.</p> <p>SP21/11.3 It was resolved that the Committee:</p> <ol style="list-style-type: none"> 1. Note the actions being taken in support of introduction of the Smoke Free Regulations on 1.3.21 2. Endorse not providing designated smoking areas within hospital grounds to ensure all our hospital sites become smoke free through delivery of the Smoke Free Regulations to their fullest extent. 	
<p>SP21/12 Sport North Wales Business Case</p> <p>SP21/12.1 The Executive Director of Public Health presented the paper and confirmed the matter had received Executive Team support. She felt there were a range of positive opportunities presented and confirmed that governance aspects had been reviewed.</p> <p>SP21/12.2 A member enquired around the timeline and it was confirmed that Welsh Government were expecting the business case by the end of February. The Executive Director of Public Health also agreed to determine who was leading within Bangor University and to let Prof Nicky Callow know. A member commented that whilst she was supportive of the proposals she was concerned that implementation might be affected by leisure centres struggling financially post lockdown. The Executive Director of Public Health accepted the point but referred to monies that would be available through Building a Healthier Wales. Another member noticed that the Governance Board would be made up of six appointed Local Authority members only. The Executive Director of Public Health was comfortable with this as the project was very much Local Authority led but she was confident that health partners would still have influence.</p> <p>SP21/12.3 It was resolved that the Committee:</p> <ol style="list-style-type: none"> 1. Endorse the establishment of the Sport North Wales (SNW) Partnership. 2. Agree that Betsi Cadwaladr University Health Board becomes a partner in the Sport North Wales (SNW) Partnership. 	TO
<p>SP21/13 Test Trace Protect (TTP) update</p> <p>SP21/13.1 It was resolved that the Committee note the status of the multiagency response programme for the North Wales TTP programme.</p>	
<p>SP21/14 North Wales COVID-19 Mass Vaccination Plan</p> <p>SP21/14.1 It was resolved that the Committee receive the North Wales COVID-19 Mass Vaccination Plan developed jointly with partners.</p>	

<p>SP21/15 North Wales Regional Partnership Board update</p> <p>SP21/15.1 It was resolved that the Committee note the updates received at the North Wales Partnership Board and receive the notes of the meeting held on 11th December 2020</p>	
<p>SP21/16 Population Needs Assessment Rapid Review</p> <p>SP21/16.1 The Executive Director of Planning and Performance noted that the needs assessment would continue to inform the planning for 2020/21.</p> <p>SP21/16.2 It was resolved that the Committee receive the Population Needs Assessment Rapid Review Reports and note the work that had been undertaken which will inform future strategies and plans.</p>	
<p>SP21/17 Public Engagement update</p> <p>SP21/17.1 The Chair wished to record her view that this was a very positive, good quality paper and that Communications and Engagement colleagues should be given the opportunity to present the next scheduled paper in person.</p> <p>SP21/17.2 It was resolved that the Committee note the progress detailed in the paper</p>	
<p>SP21/18 Socio-Economic Duty (SED) Procedure</p> <p>SP21/18.1 Whilst it was acknowledged that a procedure did not require formal approval at Committee level, members felt that the implications of the SED would be far reaching. An amendment to the recommendation was therefore agreed and it was resolved that the Committee note and endorse the procedure.</p>	
<p>SP21/19 Issues of significance to inform the Chair's assurance report</p> <p>To be agreed outside of the meeting.</p>	
<p>SP21/20 Date of next meeting</p> <p>9.30am 15.4.21</p>	