



Strategy, Partnerships and Population Health (SPPH) Committee
Minutes of meeting held in public on 15.4.21
via Zoom

Present:	
Lyn Meadows	Independent Member (Chair)
Nicky Callow	Independent Member
John Cunliffe	Independent Member
Linda Tomos	Independent Member
In Attendance:	
John Darlington	Assistant Director ~ Corporate Planning
Sue Green	Executive Director of Workforce and Organisational Development (OD)
Rob Nolan	Finance Director – Commissioning and Strategic Financial Planning
Teresa Owen	Executive Director of Public Health (part meeting)
Glynne Roberts	Programme Director - Well North Wales (part meeting)
Dawn Sharp	Deputy Board Secretary (part meeting)
Jo Whitehead	Chief Executive
Mark Wilkinson	Executive Director Planning and Performance
Andrea Williams	Head of Informatics Programmes Assurance and Improvement (part meeting)
Observing	
Andy Burgen	North Wales Community Health Council (NWCHC)
Dave Harries	Head of Internal Audit

Agenda Item Discussed	Action By
<p>SP21/1 Chairs opening remarks and apologies for absence</p> <p>SP21/1.1 Due to the temporary non-availability of internet connection for some colleagues working at Health Board premises, the meeting start time was delayed and items were reordered or deferred. The meeting commenced at 10.00am.</p> <p>SP21/1.2 Apologies were noted for Arpan Guha, Gill Harris and Andrew Doughton</p> <p>SP21/1.3 The Committee Chair advised that she had reviewed the Socio-economic Duty Impact Assessment Procedure which had been updated following the previous meeting. The procedure itself remained unchanged, however it had been illustrated with a case study to help translate the Duty into practice and further prompts had been added to the template section.</p>	
<p>SP21/22 Declarations of Interest</p> <p>None declared.</p>	

<p>SP21/23 Draft minutes of the meeting held on 23.2.21 for accuracy, matters arising and summary action log</p> <p>The minutes were approved as an accurate record and updates were provided against the summary action log.</p>	
<p>SP21/24 Digital Strategy</p> <p>SP21/24.1 The Head of Informatics Programmes Assurance and Improvement joined to present this item providing a brief update on the governance route taken. It was noted that the Equality and Socio-Economic duty assessments were being finalised. The Committee complimented the work undertaken to date, citing it as an exemplar for future strategy developments.</p> <p>SP21/24.2 In response to the Committee she advised that financial risk was captured within the risk register however, more investments would be sought via robust business cases for additional funding which would also address transformational ways of working. In respect of measuring improved experiences, she advised of baselines established with the patient experience department which would provide opportunities for regular monitoring. The Head of Informatics Programmes Assurance confirmed that whilst funding was in place for the renewal of staff IT equipment, revenue on-costs were not.</p> <p>SP21/24.3 In respect of the potential conflict between organisation and patient 'wants' the Head of Informatics Programmes Assurance emphasised that it was important to ensure that digital exclusion was considered. In regard to staff, she advised that there was finite resource available and therefore expectation would need to be managed.</p> <p>SP21/24.4 The Committee questioned acceptable levels of connectivity cover across the region which the Head of Informatics Programmes Assurance confirmed was an issue which required addressing with particular regard to on-call personnel.</p> <p>It was resolved that the Committee endorsed and supported the submission of the Digital Strategy for approval at the May meeting of the Health Board.</p> <p><i>[Andrea Williams left the meeting]</i></p>	
<p><i>[Glynne Roberts joined the meeting]</i></p> <p>SP21/25 Well North Wales (WNW) annual report 2020/21</p> <p>SP21/25.1 The WNW Programme Director presented this item. He highlighted the four key strands of the Well North Wales programme as Infrastructure and Networking; Housing and Homelessness; Social Prescribing, and Food Poverty which were interlinked. The focus remained on addressing the social determinants, and working to build the network of relevant organisations to work with the Health Board in a co-ordinated programme to tackle health inequalities. During the period under review, many of the on-going initiatives had to be put on hold, due to the Programme Director taking on a lead role with Covid Testing. A number of the key partners in other organisations were likewise re-deployed to support the</p>	

<p>Covid agenda. However, much progress was still made and a number of initiatives came to fruition during the year. The WNW Programme Director provided examples of these in respect of homelessness and project blending. He stated that the impact of Covid19 had been immense.</p> <p>SP21/25.2 The Committee was pleased to see the breadth of work that had been undertaken by the Well North Wales programme given the constraints of the pandemic. Concern was raised on the fragility of funding streams supporting the programme particularly in regard to Social Prescribing. It was noted that the WNW Programme Director would be part of a ministerial review group considering this area. The Committee requested that greater detail of scope, size and measures be provided within the next annual report.</p> <p>SP21/25.3 Partnership working with Universities was acknowledged in the report and it was noted that the programme would be more heavily focussed on the food poverty agenda as well as Social Prescribing going forward.</p> <p>It was resolved that the Committee approved the report and endorsed the partnership approach taken to address the issue of health inequalities across North Wales</p>	GR
<p>SP21/26 Quarter 3/4 2020/21 Delivery Plan monitoring to February 2021</p> <p>SP21/26.1 The Executive Director of Planning and Performance presented the monitoring report and advised that further actions had been completed since publication of the document.</p> <p>SP21/26.2 In response to the Committee, assurance was provided that whilst the Digital Strategy was being moved forward ahead of the Clinical Services Strategy each would be underpinned by the other and not decoupled. It was acknowledged that the Clinical Services Strategy required further co-design work in line with other strategic reviews and refreshes eg Living Healthier, Staying Well and incorporating organisational learning and best practices from the pandemic. It was noted this would take place at a future workshop.</p> <p>SP21/26.3 In the discussion which ensued on committee planning the Chief Executive pointed out that the workshop could also consider how assurance provision could be balanced with future gazing.</p> <p>SP21/26.4 The Committee was pleased to note the number of plans reported as completed.</p> <p>It was resolved that the Committee noted the report</p>	
<p>SP21/27 Development of 2021-22 plan update and commencement of 2022/23</p> <p>SP21/27.1 The Assistant Director ~ Corporate Planning provided a powerpoint presentation which encompassed</p> <ul style="list-style-type: none"> • 2021/22 plan progress • planned care recovery • population and organisational outcomes 	

<ul style="list-style-type: none"> • review & refresh of our existing focused priorities for 2022/23 • key considerations for future planning • examples of 2022/23 strategy and planning map • hierarchy of plans, examples of planning products • outline timetable under development • risks <p>SP21/27.2 The Committee noted that following the submission of BCU's draft plan to WG it was expected that a further refreshed plan would be submitted in July 2021, given the continuing pandemic situation. In response to the Committee the Chief Executive explained how the Targeted Intervention maturity matrix would be aligned. The Executive Director of Planning and Performance concurred and commented that action plans would also be required in support of the Plan. The Executive Director of Primary and Community services acknowledged risks and pointed out that positive opportunities for transformation and staff would be sought out.</p> <p>SP21/27.3 The Committee was concerned that the 2022+ Delivery plan timetable scheduled the draft plan for Board consideration in December 2021, which the Committee considered too late to enable sufficient quality assurance. It was understood that the planning process was being reviewed in May. The Assistant Director ~ Corporate Planning acknowledged that whilst timescales were tight, he believed that adherence to the deadlines could be achieved as there was improved strategic alignment.</p> <p>It was resolved that the Committee noted the presentation</p>	
<p>SP21/28 All Wales Strategic Programme for Primary Care / Cluster developments and plans</p> <p>SP21/28.1 The Executive Director Primary and Community Services presented the report which set out key achievements since the previous submission, refreshed priorities and priorities for 2021/22. He pointed out that priorities had been affected by the pandemic.</p> <p>SP21/28.2 The Committee questioned whether GPs were aware of the programme work. The Executive Director Primary and Community Services advised that those representing practices within clusters would be cognisant however there was no contractual requirement for other primary care contractors (which also included dentists and optometrists). He acknowledged this required further work.</p> <p>It was resolved that the Committee noted the work to date of the all Wales Strategic Programme for Primary Care, and the outputs delivered nationally and across BCUHB.</p>	
<p>SP21/29 Development of a Pharmaceutical Needs Assessment update report</p> <p>SP21/29.1 The Executive Director Primary and Community Services informed the report provided progress in the development of the Pharmaceutical Needs Assessment (PNA) which was required it be in place for the Health Board by October 1st 2021, as required under the Public Health Wales Act 2017 and the NHS (Pharmaceutical Services) (Wales)</p>	

<p>Regulations 2020. The PNA would assess the health needs of the population of North Wales and how these may change within the five-year lifetime of the document, and the current provision of pharmaceutical services in order to identify any current or future needs for a particular service or a range of services. The PNA would be used by the Health Board to determine applications for new or additional premises from pharmacy contractors, dispensing appliance contractors and dispensing doctors. The Executive Director Primary and Community Services drew attention to the consultation period required and agreed to share the documentation with the Committee members for information.</p> <p>It was resolved that the Committee noted the requirement for the Health Board to develop and publish a Pharmaceutical needs Assessment by 1st October 2021, and the process and progress to date to meet the deadline.</p>	CS
<p>SP21/30 Bilingual Skills Policy and Procedure</p> <p>SP21/30.1 The Executive Director of Public Health introduced this item. It was noted that this was a key document to promote and facilitate effective workforce planning and recruitment, in order to ensure the successful delivery of healthcare services through the medium of both Welsh and English within BCUHB. In addition, the Bilingual Skills Policy reflected the procedural and organisational changes that had been put in place by Workforce & OD following the conclusion of an internal audit, which was conducted to establish whether or not ‘there is a robust control environment in place within the Health Board to action the requirements of the Bilingual Skills Strategy and ensure compliance with the Welsh Language Measure (Wales) 2011’. Furthermore, as the Health Board had recently become subject to the Welsh Language Standards (on 30th May 2019), the policy had been updated to reflect the relevant statutory requirements and best practice in relation to recruitment and Welsh-medium service provision.</p> <p>SP21/30.2 In response to the Committee’s question as to how the policy would fit with the Integrated Social Care Strategy, the Executive Director of Public Health explained various examples of sharing in partnership working including the Regional Partnership Board. The Committee was pleased there was a ‘real direction of travel’ which was growing in strength each year in relation to bilingual skills within BCU to support services, staff and the Welsh speaking population albeit that challenges had been presented with the pandemic.</p> <p>It was resolved that the Committee approved the updated the BCUHB Bilingual Skills Policy & Procedure</p>	
<p>SP21/31 SPPHC Board Assurance Framework (BAF) Principal and Corporate Risk Report</p> <p>SP21/31.1 Dawn Sharp (Deputy Board Secretary) attended to present the report. The Committee considered the Board Assurance Framework and agreed that the Workforce Optimisation risk (BAF 20-21) should report to the Finance and Performance Committee in future and that that BAF 20-01 Surge/Winter Plan should transfer to the SPPH Committee.</p>	

<p>SP21/31.2 Whilst the Committee acknowledged the Board Assurance Framework had been agreed by the Board, the format of reporting required further work in order to achieve a consensus of understanding regarding actions and mitigations and provide better clarity on what changes would affect the risk scores.</p> <p>SP21/31.3 In relation to BAF20-03 Sustainable key health services, the Committee Chair requested that the Executive Director of Planning and Performance review the target risk rating which was deemed to be too low. Discussion ensued regarding BAF20-26 Development of Annual Operational Plan 2021/22 and it was agreed that this should also be reconsidered on the basis of the next draft plan.</p> <p>SP21/31.4 The Chief Executive commented that the latest challenges had significantly impacted the organisation and it would be useful to reflect on BCU's 'why' and 'how' positions in comparison to other Health Boards.</p> <p>It was resolved that the Committee</p> <ul style="list-style-type: none"> • reviewed and noted the progress on the Principal Risks as set out in the Board Assurance Framework (BAF) • agreed the Workforce Optimisation risk (BAF 20-21) should in future report to Finance and Performance Committee and the BAF 20-01 Surge/Winter Plan should transfer to the SPPH Committee • noted the revised scoring in respect of the Annual Plan risk (BAF 20-26) and agreed this required further consideration <p><i>[Dawn Sharp left the meeting]</i></p>	<p>MW</p> <p>DS</p>
<p>SP21/32 Draft Committee 2020/21 annual report</p> <p>SP21/32.1 The Committee reviewed the draft annual report and, following discussion, agreed that the Executive Director of Planning and Performance make the following amendments:</p> <ul style="list-style-type: none"> • complete the narrative to support sections "Committee assessment of the quality of the assurance provided" • amend the RAG status to 'Amber' of section "Ensure the alignment of supporting strategies such as Workforce, Capital Planning, Estates infrastructure and Information, Communications and Technology (ICT) in the development of the Strategic Plans" as the Workforce strategy was not sufficiently developed • complete Section 10 : Focus for the year ahead <p>SP21/32.3 In regards to the Cycle of Business it was agreed that the Living Healthier Staying Well strategy review be included. The Committee voiced concern regarding the heavy workload to be dealt with, however it was acknowledged that a Governance Review was taking place.</p> <p>It was resolved that the Committee:</p> <ul style="list-style-type: none"> • noted the Terms of Reference • approved the Cycle of Business 2021/22 subject to the amendments agreed and outcomes of the forthcoming governance review. • agreed that Chair's action be taken to approve the Committee annual report, following the actions above, for submission to the Audit Committee on 25.5.21 	<p>MW</p> <p>MW/LM</p>

<p>SP21/33 Mewn Undod mae Nerth (Stronger Together) – Organisational and System Development Route Map</p> <p>SP21/33.1 The Executive Director of Workforce &OD presented this item which outlined the Health Board’s commitment to embark on a “reset” strategic organisational and system development programme as part of its Annual Plan and longer-term transformation and improvement and supported by sustainability funding secured from Welsh Government. Over the previous 3 months, a considerable amount of work had been undertaken to develop a route map for the development of Organisational, System and Leadership Strategy. The report set out the progress made to date and the plan moving forward.</p> <p>SP21/33.2 In response to the Committee assurance was provided that ringfenced funding was in place to move forward the Mewn Undod mae Nerth ~ Stronger Together Programme Business Case and that backfill funding would be available to ensure internal staff cover and also effective clinician involvement. In addition, confirmation was provided that concerns and issues could be addressed at an early stage of the development, rather than at the end, as the Speak Out Safely initiative was in place. The Chief Executive was keen to emphasise that Stronger Together was an important strategic organisational development in order to support all employees in having confidence that developments would be ‘with us’ and not ‘to us’ thereby engendering a genuine together approach moving forward through challenges and opportunities ahead. The Committee commended this approach.</p> <p>SP21/33.3 In respect of the 2020 staff survey the Committee was concerned that most indicators were not as positive as in previous years, albeit that a direct comparison of results could not be made between the 2018 survey and the 2020 survey as the participation rate and method of completion was different i.e. online survey only available in 2020 and the survey was open for 3 weeks as opposed to 8 weeks. The Executive Director of Workforce and OD explained that the challenges of Covid19 had meant that whilst some actions had not been moved forward divisional management teams were now in discussions to address them. It was agreed that regular reports would be scheduled to be brought to the Committee.</p> <p>It was resolved that the Committee noted</p> <ul style="list-style-type: none"> • the Programme Business case • the first phase had been approved by the Executive Team • the next steps and feedback comments in preparation for submission through governance structure 	SG
<p>SP21/34 Test Trace Protect (TTP) update</p> <p>It was resolved that the Committee noted the status of the multiagency response programme for the North Wales TTP programme</p>	
<p>SP21/35 North Wales Transformation Funds</p> <p>It was resolved that the Committee</p>	

<p>noted</p> <ul style="list-style-type: none"> • the information contained within the report by way of progress with the North Wales Transformation programme • the early evidence of benefits achieved 	
<p>SP21/36 Summary of business considered in private session to be reported in public</p> <p>It was resolved that the Committee noted the document</p>	
<p>SP21/37 Public Service Boards update – Wrexham and Flintshire</p> <p>It was resolved that the Committee noted the presentation</p>	
<p>SP21/38 Issues of significance to inform the Chair's assurance report</p> <p>To be agreed outside of the meeting.</p>	
<p>SP21/39 Date of next meeting</p> <p>17.6.21</p>	