



Betsi Cadwaladr University Health Board (BCUHB)
Minutes of the Annual General Meeting (AGM) Held on 25.7.19
in Neuadd Reichel, Bangor

Present:

Mr M Polin	Chair
Mr G Doherty	Chief Executive
Cllr C Carlisle	Independent Member
Mrs D Carter	Acting Executive Director of Nursing & Midwifery
Mr J Cunliffe	Independent Member
Mrs M Edwards	Associate Member ~ Director of Social Services
Mrs S Green	Executive Director of Workforce & Organisational Development (OD)
Mrs S Hill	Acting Executive Director of Finance
Mrs J Hughes	Independent Member
Mrs M W Jones	Vice Chair
Mrs G Lewis-Parry	Board Secretary
Mrs L Meadows	Independent Member
Dr E Moore	Executive Medical Director
Miss T Owen	Executive Director of Public Health
Prof M Rees	Vice Chair of Healthcare Professionals Forum
Mrs L Reid	Independent Member
Mr C Stockport	Executive Director of Primary Care & Community Services
Mr A Thomas	Executive Director of Therapies & Health Sciences
Mrs H Wilkinson	Independent Member
Mr M Wilkinson	Executive Director of Planning & Performance

In Attendance:

Mrs K Dunn	Head of Corporate Affairs
Mrs L Singleton	Director of Partnerships, Mental Health & Learning Disabilities (<i>Deputy for Mr A Roach</i>)

Translator, members of public and observers

Agenda Item	Action By
<p>A19.1 Welcome and Introductions</p> <p>A19.1.1 The Chair welcomed everyone to the AGM of the Health Board. Each member introduced themselves bilingually and the Chair thanked them for their commitment to promoting the use of the Welsh Language. He then read a prepared statement as follows:</p> <p>A19.1.2 “Good Morning and welcome to the annual general meeting of Betsi Cadwaladr University Health Board. I am Mark Polin, Chair of the Board. This is my first Annual General Meeting, having taken up this role on 1st September last year. A number of important changes have occurred between then and now and these include:</p> <ul style="list-style-type: none"> The appointment of new Independent Members and a Vice Chair, and the development of a focus within the entire group of Independent Members on ensuring the right governance, scrutiny and assurance processes exist and where they do not, that this is addressed. 	

- The appointment of two new Directors - Planning and Performance, and Primary and Community Care, and more recently new appointments to the existing roles of Medical Director and Director of Finance.
- In recent weeks we have brought in expertise to assist with financial recovery, a need that was recognised by the Public Accounts Committee too.
- We have altered the way this Board carries out its business, here in this forum, and also across our Committee structure; something that has been positively commented upon by the Wales Audit Office. This has included a move to bi-monthly Board meetings so as to provide for workshops in the intervening months which enable us to examine important topics in depth, and agree the actions required.
- We have continued to pursue the development of the Board, with work underway with the Kings Fund, so as to ensure the Board can operate at its optimum level.
- We have sharpened our focus in terms of performance reporting, concentrating on priority areas and including those aspects of performance that are obstacles to the organisation exiting from Special Measures; and
- We have devoted a great deal of time to the being clear as to our priorities, what we need to do to achieve them, and what outcomes will be measured to demonstrate improvement.

Whilst much has been achieved by the organisation over the last year, which I will leave Gary to describe as he has been here for the full term, there is still much more to do if the organisation is to move onto a sustainable road to improvement, and in this regard, the importance of the business of the Board meeting that follows this AGM should not be underestimated. For that business addresses aspects of leadership and direction, performance (including quality and patient and staff safety), and also the management of our finances which are the key areas requiring our attention and concerted action. With regard to leadership and direction, following our work with Price Waterhouse Coopers and with the Welsh Government Finance Delivery Unit, a revised Plan is being presented today which should clearly describe our priorities for this financial year as well as looking forward, and set out the actions to be taken to deliver. Performance improvement targets for both planned and unplanned care, will be presented for discussion and approval at the same time. Alongside the Plan, progress will be reported on work that is underway to devise a Clinical Services Strategy which will more clearly articulate our future vision as to the configuration and model of delivery of all our key services. The Board intends that clinicians, and all other elements of the workforce, will be engaged in the design of this Strategy, for there can be no doubt that change will be required moving forward and we want that change to be formulated and led by those who deliver the services in question. Turning to finance, change is underway here too as I may have already alluded to. The appointment of an experienced financial Recovery Director from outside the organisation, coupled with a new interim Director of Finance, will be accompanied by much greater rigour in our approach to financial management and improvement. As I say in my introduction to the Annual Report, the Board also recognises that everyone wishes to work in conditions that are conducive to enjoying their work and to providing the best service, and to be assisted by technology that makes their lives easier and safeguards those we care for. In this regard, the Board has arrived at a clear sense of where our priorities lie in terms of investment in, and rationalisation of, the properties we occupy, and plan to arrive at a similar determination shortly in terms of information technology. We believe there is scope to reduce unnecessary expenditure thus allowing for investment in improvements that will help us all to work better. The onus will be on us to turn these aspirations into delivery. Efforts are also being stepped up in terms of determining the skills and roles we need within our workforce, both today and going forward, to better drive our recruitment activities, which should in turn lessen our call on securing staff through agencies. The Board recognises that these planned

<p>improvements, and more, will not be delivered without the continuing dedication, resilience and professionalism of those who work in the organisation, and we are most grateful for all they have achieved over the last year. Thank you for attending, and for your interest in the Health Board and its work.”</p>	
<p>A19.2 Annual Report 2018/19 Incorporating Annual Governance Statement and Special Measures Update</p> <p>A19.2.1 The Chief Executive delivered a presentation which:</p> <ul style="list-style-type: none"> • Provided a reflection on the past year – highlighting it had been a time of challenge but also improvements such as de-escalation of primary care out of hours from Special Measures, improvements in quality and safety, positive outcomes from the staff survey and achievement of platinum standard for the Corporate Health at Work Standard. • Included a summary of progress against all Special Measures themes. • Set out how engagement with key partners had been addressed. • Described the principles of A Healthier Wales. • Detailed improvements in mental health services and responding to the HASCAS and Ockenden recommendations. • Described a range of assurances from Healthcare Inspectorate Wales. • Set out new models of care. • Highlighted sustained reductions in ambulance delays. • Detailed progress made with regards to GP clusters. • Noted a sustained improvement in infection prevention control. • Described the preventative work being progressed within a community setting. • Confirmed a reduction in delayed transfers of care. • Highlighted a reduction in mortality rates. • Set out the development and investment in estates, equipment and services. • Described a range of ongoing challenges including planned care, unscheduled care and finance • Set out the Board’s priorities moving forward <p>A19.2.2 The Chief Executive commended the annual report to the meeting and invited members and observers to review the published document.</p>	
<p>A19.3 Annual Quality Statement (AQS)</p> <p>A19.3.1 The Acting Executive Director of Nursing and Midwifery delivered a presentation which:</p> <ul style="list-style-type: none"> • Confirmed that the AQS was a key document written for the public • Highlighted that the AQS was aligned to the healthcare standards under the leadership of the three clinical executives • Referenced the Quality Improvement Strategy (QIS) as the main over-arching strategic document • Described the achievements against the Board’s priorities for 2018-19 • Set out the priorities for 2019-20 which included the delivery of safe, effective and compassionate care; engagement of patients and service users in making improvements; and the provision of care in line with the QIS. 	
<p>A19.4 Annual Financial Accounts</p>	

<p>A19.4.1 The Acting Executive Director of Finance delivered a presentation which described:</p> <ul style="list-style-type: none"> • Statutory and other financial targets and BCU's performance against them • The organisation's revenue expenditure • A breakdown of expenditure by Division • Expenditure by category (pay, non-pay, primary care and care from other providers) • Agency staff use • A range of capital investments • The audit of accounts by the Wales Audit Office which confirmed there were no material misstatements or reporting inconsistencies • A forward look for 2019-20 against a local and national context • Revenue and savings targets 	
<p>A19.5 Forward Look</p> <p>No specific comments were raised.</p>	
<p>A19.6 Open Forum</p> <p>A19.6.1 Mr M Joyce (member of public) raised a question as to whether the Health Board had a statutory duty to provide clinically effectively safe and dignified patient care, and how it would ensure that any service transformation was effective and safe.</p> <p>A19.6.2 The Chief Executive responded that whilst there were statutory duties around finance, the Board did indeed have a duty to provide clinically safe services to its population. He alluded to a range of areas where there was demonstrable progress but also acknowledged the remaining challenges which had also been described by Mr Joyce. He confirmed that the Board's Annual Plan and Three Year Outlook did have a level of associated risk. In terms of the Service Strategy whilst this was not yet fully comprehensive there was progress across various strands of work, and there was a commitment to ensuring that staff, patients and stakeholders were listened to as part of any service transformation. The Executive Medical Director also made reference to examples where service change had been successfully and positively implemented such as Primary Percutaneous Coronary Intervention (PPCI) and vascular care. In respect of ensuring services were safe he added that data from complaints, outcomes, legal cases and patient feedback were all triangulated.</p> <p>A19.6.3 Mr Joyce commented further that he had raised similar issues for the past seven years and had not been assured by the responses. The Chair acknowledged the undesirable situation that the Board was in in that it was being asked to consider a Plan that was not finalised and he indicated it would not be his intention to be in the same situation next year. He made reference to the ongoing work regarding financial recovery and recognised the significant scope for improvement around planned and unscheduled care. He was however assured that there was a far more robust focus on developing the Plan, and that benefits of service improvements would be more clearly described within future business cases. He concluded by supporting the view that whether or not the duty to provide safe care was a statutory duty, it remained the Board's focus in all that it did.</p>	
<p>A19.7 Concluding Remarks</p>	

<p>A19.7.1 The Chair wished to acknowledge that progress had been made and the Board was beginning to focus on the right things to ensure a sustainable improvement journey. He was keen to also see a focus on areas that would enable the Board to be taken out of special measures.</p>	
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